

LD3000024592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2011 NOV 29 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
NOV 30 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ocean View Development LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kenneth V. Poole

Name of Person

Ocean View Development LLC dba Dixie Fish Company

Firm/Company

714 Fisherman's Wharf

Address

Fort Myers, Florida 33931

City/State and Zip Code

CWworkgiant@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kenneth V. Poole

Name of Person

at (239)

851-5533

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☒ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Ocean View Development LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 7/7/2003 and assigned
Florida document number L03000024592.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

125271-16 McGregor Blvd #262

Fort Myers, Florida 33908

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Christopher Whitaker

New Registered Office Address:

15271-16 McGregor Blvd #262

Enter Florida street address

Fort Myers

Florida

33908

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

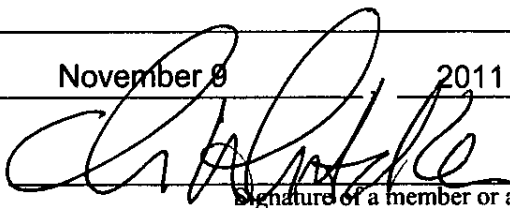
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Christopher Whitaker	15271-16 McGregor Blvd #262 Fort Myers Florida 33908	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Kenneth V. Poole	714 Fisherman's Wharf Fort Myers, Florida 33931	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Kenneth V. Poole	714 Fisherman's Wharf Fort Myers, Florida 33931	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Dated November 8 2011


 MGRM
Signature of a member or authorized representative of a member

Christopher Whitaker
Typed or printed name of signee


Page 2 of 2

Filing Fee: \$25.00



 11.9.2011

I Kenneth V. Poole Hereby State
That Chris Whitaker will Replace myself
as Managing member of Ocean View Delapart
on November 9th, 2011 For Full time
authcity of all Business operations related
to this Dixie Fish Co / ~~ca~~ Restaurant w/
Zero ownership in Building.

X  Kenneth V. Poole
11/9/11

(KP)

X  Chris Whitaker
11/9/11

(CW)

X 

