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> 2011 DEC -2 PM 2: 33 SECRETARY OF STATE FALLAHASSEF, FI OBION

J. BRYAN

DEC -5 2011

EXAMINER

COVER LETTER

TO:	Registration Se Division of Cor					
SUBJE	CT:	Ocean View	Development, LLC			
	-	Name of Lim	ited Liability Company			
The end	closed Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please r	eturn all correspo	ondence concerning this matte	r to the following:			
			Kenneth V. Poole			
			Name of Person	:	ZOII TAI	
Ocean View Deve			lopment, Inc. dba Dixie Fis	h Company	2011 DEC -2 SECRETARY TALLAHASS	
•			Firm/Company		-2 .SSI	1
7			714 Fisherman's Wharf		PH 2: 33 Y OF STATE SEE. FLORID	ILEU
			Address		ORE S	
Fo			ort Myers, Florida 33931 City/State and Zip Code		DA W	
					-	
•			/workgiant@gmail.com			
		E-mail address: (to be used for future annual report notif	fication)		
For furt	her information co	oncerning this matter, please of	call:			
	Keni	neth V. Poole	at (_239)	851-5533		
Name of Person		f Person	Area Code & Daytim	ne Telephone Numbe	r	
Enclose	d is a check for th	e following amount:				
\$25.00 Filing Fee & Certificate of Status MAILING ADDRESS: Registration Section			\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	l) Certified	ite of Status &	d) .
			STREET/COURI Registration Section			

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

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ocean View	Development LL	C on our records	
(<u>Name of the Limited Liability Co</u> (A Florida Limi	ited Liability Company)	s on our records.	
The Articles of Organization for this Limited Liability Complete Florida document numberL03000024592	pany were filed on	07/07/2003	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company her	e:	
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		Fo	201
(Principal office address MUST BE A STREET ADDRES	<u>(S)</u>	LEC	富工
		H A A	
		SEE,	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		<u>1</u>	
(Mailing address MAY BE A POST OFFICE BOX)			Den 23
			<u> </u>
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		our records, <u>enter t</u>	he name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	ress		
	, Florida		
	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>	Name	Address	Type of Action				
MGNM	Christopher Whittaker	15271-16 McGregor Blvd #262 Fort Myers, Florida 33908	Add Remove 				
MGNM	Kenneth V. Poole	714 Fisherman's Wharf Fort Myers, Florida 33931	Add Remove				
	·		Add Remove				
	···	TSE SEE	Add Remove				
		HASSEC	Add Talentove				
		,	Add ☐Remove				
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)					
	Mris bolistoka dram Clare tollo Chi	this day forward	- - -				
_0	s member and	on Manager mem	to atla				
Dated		The state of the s	~ <i>v</i> ~ <i>w</i> ~*				
		authorized representative of a member opher Whitaker	•				
_		nrinted name of signee					

Page 2 of 2

Filing Fee: \$25.00