L04000040517

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SECRETARY OF STATE
TALLAHASSEF F 1081E

T. HAMPTON

OCT - 7 2008

EXAMINER

COVER LETTER

Division of Cor	porations		
SUBJECT:	128 Ocean View,	LLC	
Sebster.		ted Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u> Maura A Zisk</u>	a. Esquire	
		(Name of Person)	
	Kochman & Zis	ka, PLC	
		(Firm/Company)	
	222 Lakeview	Avenue, Suite 950	
		(Address)	
	<u>West Palm Bea</u>	ich, FL 33401	
		(City/State and Zip Code)	
For further information c	concerning this matter, please co	nil:	
<u> </u>	iska	at (561_)_802=8960	
	of Person)	(Area Code & Daytime T	Telephone Number)
Englosed is a check for the	he 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)
MAIL	ING ADDRESS:	STREET/COURIER	R ADDRESS:

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

Registration Section

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Com (A Florida Limited	LT.C. pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L0400040517</u>	ny were filed on <u>May 27, 2004</u> and assigned	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:	
The new name must be distinguishable and end with the words "Li 'L.L.C."	mited Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	222 Lakeview Avenue, Ste. 950	
(Principal office address MUST BE A STREET ADDRESS)	West Palm Beach, FL 33401	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	222 Lakeview Avenue, Ste. 950 West Palm Beach, FL 33401	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, enter the name of the new	
Name of New Registered Agent: Mau	ra A. Ziska	
New Registered Office Address: 222	Lakeview Avenue, Ste. 950 (Enter Florida street address)	
Wes	t Palm Beach , Florida 33401 (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen	ıt:	
hereby accept the appointment as registered agent and ag the provisions of all statutes relative to the proper and com accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	plete performance of my duttes, and I am familiar with and sprovided for in Chapter 608, F.S. Or, if this document is ce address, I hereby confirm that the limited liability	

Page 1 of 2

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
MGRM_	Regine Traulsen	220 Wells Road Palm Beach, FL 33480	Add Remove
MGR	Maura A. Ziska	222 Lakeview Ave. Ste. 950 West Palm Beach, FL 33401	Add Remove
		FFFFFEE	Add Remove
····			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_
			_ _
			-
Dated No	Maura	2) 2) 8xa	
		or authorized representative of a member Sa. Manager or printed name of signee	
		Page 2 of 2	

Filing Fee: \$25.00