

105000020588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

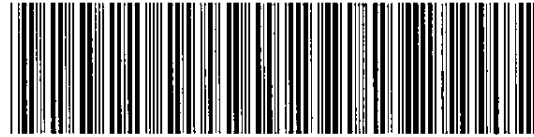
(Business Entity Name)

(Document Number)

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LABORATORY

JUL 12 2017

CHIVERS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: OZ-MAR ENTERPRISES 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:

FEDERICO ORTIZ

Name of Person

OZ-MAR ENTERPRISES LLC

Firm/Company

13901 SW 279TH LANE

Address

HOMESTEAD, FL 33032

City/State and Zip Code

RICO@RICOSPRO.COM

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

For further information concerning this matter, please call:

FEDERICO ORTIZ

786 9707999
at (_____) _____

Name of Person

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**

OZ-MAR ENTERPRISES LLC

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

The Articles of Organization for this Limited Liability Company were filed on 03/01/2005 and assigned
Florida document number L05000020588.

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 contain 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)

13901 SW 279TH LANE

ATTN: RICO'S

HOMESTEAD, FL. 33032

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

13901 SW 279TH LANE

ATTN: RICO'S

HOMESTEAD, FL. 33032

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:

RICO'S PROFESSIONAL SERVICES LLC

New Registered Office Address:

9100 NW 97TH TERRACE

Enter Florida street address

MEDLEY

City

Florida

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	FEDERICO ORTIZ	13901 SW 279TH LANE.	<input checked="" type="checkbox"/> Add
		HOMESTEAD, FL. 33032	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MICHAEL ANTHONY COOK	5250 CHRISTMAS PL.	<input checked="" type="checkbox"/> Add
		WALDORF, MD 20601	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RICO'S PROFESSIONAL SERVIC	6171 MIAMI LAKES DRIVE	<input type="checkbox"/> Add
		MIAMI LAKES, FL. 33014	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 JUL 10 11:17
MAIL ROOM

17 JUL 10 AM 7:10
 DIRECTOR OF FBI
 WASHINGTON DC

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 07/06 2007

FEDERICO ORTIZ

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Filing Fee: \$25.00