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(((H08000020694 3)))



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Division of Corporations

Fax Number : (850)617-6383

Account Name : CAMNER, LIPSITZ AND POLLER, PROFESSIONAL ASSOCIATION

Account Number: 075410001634

Phone

: (305)442-4994

Fax Number

: (305)442-2389



MND/RESTATE/CORRECT OR M/MG RESIGN

ONE VILLAGE 415 LLC

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EXAMINER

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liat (A Flor	bility Company as it now appears on our record rida Limited Liability Company)		
The Articles of Organization for this Limited Liabili	ity Company were filed on August 15, 200		
Florida document number <u>L0700083485</u>		SEC SEC	
This amendment is submitted to amend the following	g:	08 JAN 25 SECRETARY	
A. If amending name, enter the new name of the	limited liability company here:		
		9:3	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designa	tion "LLOCATINE appreviation	
B. If amending the registered agent and/or re registered agent and/or the new registered office a		nter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida stre	eet address)	
	, Florida		
	(City)	(Zip Code)	

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

ONE VILLAGE 415 LLC

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)

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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
MGR_	William Ramirez Bracho	10 Aragon Avenue, Unit # 1507 Coral Gables, El 33134	Add Remove
_			Add Remove
			Add Remove
· · · · · · · · · · · · · · · · · · ·			Add Remove
	·		Add Remove
			Add Remove
D. If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	OB JAN
			125 128
			P STAIR
Dated January	Romel -	 ·	
R	Signature of a member or ussell L. King. Esq.	authorized representative of a member	

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Filing Fee: \$25.00

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