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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: OCEAN INVESTMENT PARTNERS, 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:
MICHAEL J. GARAVAGLIA, ESQUIRE
(Name of Person)
COLLINS, BROWN, CALDWELL, BARKETT & GARAVAGLIA
(Firm/Company)
756 BEACHLAND BOULEVARD
(Address)
VERO BEACH, FL 32963
(City/State and Zip Code)
For further information concerning this matter, please call:
JEAN ROOP at (772) 231-4343
(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 Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

FILED SECRETARY OF STATE DIVISION OF CORPORATION

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OCEAN IN	IVESTMENT PARTNERS, LLC)	
(Name of the Limited Lia (A Flo	ibility Company as it now appears on orida Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liabil	lity Company were filed on MAR	CH 25, 2008 and assigned	
Florida document number <u>L08000030478</u>	•		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:	·	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Company,"	the designation "LLC" or the abbreviation	
Name of New Registered Agent: New Registered Office Address:			
	(Enter 1	(Enter Florida street address)	
-	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Regi	stered Agent:		
I hereby accept the appointment as registered a the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	per and complete performance of m red agent as provided for in Chapte istered office address, I hereby con	y duties, and I am familiar with and er 608, F.S. Or, if this document is	
	(If Changing Registered Agent S	ignature 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
MGRI	M JOHN T. CONROY	700 BEACH ROAD, APT, #350 VERO BEACH, FL 32963	Add Remove
MGRM	JOHN L. CONROY	700 BEACH ROAD, APT. #350 VERO BEACH, FL 32963	Add Remove
	_		Add Remove
	<u>.</u>		AddRemove
			Add Remove
			Add Remove
D. If an	nending any other information, en	ter change(s) here: (Attach additional sheets, if necessary,)
	ONLY CORRECTING THE	MIDDLE INITIAL OF THE MANAGER:	
	JOHN L. CONROY		
Dated	MARCH 28	, 2008 .	
	x John a	L Cur	
	Signature of	f a member or authorized representative of a member JOHN L. CONROY	
		Typed or printed name of signee	

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Filing Fee: \$25.00