## L08000051246

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## **COVER LETTER**

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SUBJEC	CT:	-	e Oaks LLC		
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			Amendment and fee(s) are sub	*	
Please re	eturn	all correspo	ondence concerning this matter	to the following:	
				Name of Person	<u> </u>
			Law Offices of Isaac Benn	nergui, P.A.	
				Firm/Company	<del></del>
			10800 Biscayne Boulevard	Suite 650	
			······································	Address	
			North Miami, FL 33161		5,53
				City/State and Zip Code	
			gaonlaw@gmail.com		လ ယ
				to be used for future annual report notification)	7
For furth	ner in	formation c	oncerning this matter, please co	all:	 
Law Off	fices	of Isaac Ber	nmergui, P.A.	305 3978547	- 7
		Name o	t Person	Area Code Daytime Telephone Nun	nber
			•		
			he following amount:		
<b>■</b> \$25.	.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	Difiling Fee, ficate of Status & fied Copy fied Copy is enclosed)
		•	·		
	Reg Div P.O	ling Addressistration Strision of Co. Box 632 lahassee, I	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303	e 810

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Lial (A Flor	pility Company as it now appear rida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited Liability Florida document number L08000051246	Company were filed on $\frac{05/}{}$ .	22/2008 and assigned
This amendment is submitted to amend the following	:	<b>:</b>
A. If amending name, enter the new name of the li	mited liability company he	<u>re</u> :
The new name must be distinguishable and contain the words "I	imited Liability Company." the de	esignation "LLC" or the abbreviation FLEL.C."
Enter new principal offices address, if applicable:	9520 Harding A	venue
Principal office address MUST BE A STREET AD.	DRESS) Suite 1	
	Surfside, FL 331	54 ω
•		::
Enter new mailing address, if applicable:	9520 Harding A	venue
Mailing address MAY BE A POST OFFICE BOX)	Suite 1	22
	Surfside, FL 331	54
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registe agent and/or the new registered office address here	Suite 1 Surfside, FL 331 red office address on our re	54
Name of New Registered Agent: Law	v Offices of Isaac Benmergui, I	r.Á.
New Registered Office Address: 108	00 Biscayne Boulevard, Suite (	550
	Enter Flor	ida street address
Nor	th Miami	, Florida <sup>33161</sup>

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>	Address	Type of Action
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Filing Fee: \$25.00