

LO9000003275

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100302012701

08/04/17--01018--008 **25.00

AUG 07 2017

J SHIVERS

NELSON SLOSBERGAS, P.A.

1110 BRICKELL AVENUE

SUITE 310

MIAMI, FLORIDA 33131

E-MAIL ADDRESS nelson@miami-intl-law.com

WEB PAGE www.miami-intl-law.com

NELSON SLOSBERGAS
ATTORNEY AND CIVIL LAW NOTARY

(305) 374-0030
FAX (305) 374-2855

August 1, 2017

Secretary of State
Registration Section/Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: OCEAN LANE PLAZA 909 LLC

Dear Sir or Madam:

Please find attached the Articles of Amendment to Articles of Organization of OCEAN LANE PLAZA 909 LLC, and check for the filing fee for the amount of \$25.00.

Kindly return the letter of acknowledgment in the attached *federal express envelope*, once the amendment has been filed.

Thank you for your attention to this matter.

Very truly yours,



Rita Salgado
Corporate Legal Secretary
[Direct E-Mail: rita@miami-intl-law.com]

Enclosures (as noted)

VIA FEDEX

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

OCEAN LANE PLAZA 909 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 JANUARY 9, 2009 and assigned
Florida document number L09000003275.

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)

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
City 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	CARLOS MORALES BASALO	1110 BRICKELL AVE SUITE 310	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ANA CECILIA MORALES	1110 BRICKELL AVE SUITE 310	<input checked="" type="checkbox"/> Add
		MIAMI FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ISABEL CRISTINA MORALES	1110 BRICKELL AVE SUITE 310	<input checked="" type="checkbox"/> Add
		MIAMI FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

