LU9000025793

| (Requestor's Name) (Address) | 700157455847 | | |
|--|--------------------------|--|--|
| (City/State/Zip/Phone #) | 06/22/0901053008 **25.00 | | |
| (Business Entity Name) (Document Number) | OS JUN 22 MII | | |
| Certified Copies Certificates of Status Special Instructions to Filing Officer: | ATE ORNDA | | |
| | · | | |

Office Use Only

B. KOHR

JUN 2 3 2009

EXAMINER

COVER LETTER

| TO: Registration Sect Division of Corpo | | · | |
|--|---|--|---|
| SUBJECT: OC | EANS 15 LLC (Name of Lim | ited Liability Company) | |
| The enclosed Articles of A | mendment and fee(s) are sub | omitted for filing. | |
| Please return all correspond | dence concerning this matter | to the following: | |
| | VASILIOS | PY L10 T1 S (Name of Person) | S S S S S S S S S S S S S S S S S S S |
| | | LLC. (Firm/Company) | N22 H |
| | 4242 N.V | $\sqrt{\frac{2^{1}}{2}}$ St. (Address) | 1207 |
| | MIAMI | FL, 33126 (City/State and Zip Code) | |
| For further information cor | ncerning this matter, please c | all: | |
| VASILIOS (Name of | PYLIOTIS Person) | at (<u>786)</u> 246 – (Area Code & Daytime T | clephone 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

| OCEANS 15 LLC | • | | |
|--|--|--|--|
| (Name of the Limited Liability Compa (A Florida Limited) | iny as it now appears on our records.) Liability Company) | | |
| The Articles of Organization for this Limited Liability Company Florida document number | were filed on $\frac{3}{17}$ $\frac{09}{09}$ and assigned | | |
| This amendment is submitted to amend the following: | · | | |
| A. If amending name, enter the new name of the limited liab | pility company here: | | |
| The new name must be distinguishable and end with the words "Lim"L.L.C." | ited Liability Company," the designation "LLC" or the abbreviation | | |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADDRESS) | PEG U | | |
| Enter new mailing address, if applicable: | SSEE TO | | |
| (Mailing address MAY BE A POST OFFICE BOX) | DE TO | | |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | (Enter Florida street address) | | |
| | (City), Florida (Zip Code) | | |
| | (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 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 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:

| | = Manag 1 = Man | ger naging Memb | oer | | | | |
|--------------|--------------------|--------------------|---|--------------|-----------------------------|------------------------------|----------------|
| <u>Title</u> | ٠ | <u>Name</u> | | | Address | | Type of Action |
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| D. If a | mendin | g any other i | nformation, ente | r change(: | s) here: (Attach add | itional sheets, if necessary | <u> </u> |
| | PL | EASE | CHAN | СE | DIMOS | ROUMPOS | From |
| | W | FRM | 70 | æ | MEMBER | | |
| | | | | | | PILIOTIS | |
| | F101 | m M | GRM | TO | on M | ember. | |
| Dated_ | 05 | 1011 | 09, | 200 A-1 | 9. 1. lid | 1/0 | |
| | | | | | authorized representa | tive of a member | |
| | _ | VASIL | 105 | | P7L10 printed name of signe | e T | |

Page 2 of 2

Filing Fee: \$25.00