## 10900034450

(Requestor's Name)					
(Ad	(Address)				
(Address)					
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL.			
(Bu	siness Entity Name	e)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
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## T. CLINE

JUN 10 2010

**EXAMINER** 



## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	OFI	FMar, LLC			
	Name of Limi	ted Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Jeff Glovsky			
		Name of Person			
	<del> </del>	Firm/Company			
	150	00 Bay Road, Suite 854			
		Address			
	M	iami Beach, FL 33139		2010 SEC	
	Of	City/State and Zip Code  FMarRE@gmail.com		2010 JUN -9 SECRETARY I	versease verseases
	E-mail address: (	to be used for future annual report not	ification)	[11]	1
For further information	concerning this matter, please of	all:			gerenisia Si <sub>la su</sub>
	Jeff Glovsky	at ( 305 )	830-9991 me Telephone Numbe	23	
Name	oi reison	Alea Code & Dayin	me relephone wantbe	•	
Enclosed is a check for	the following amount:				
<b>₹</b> \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	ite of Status &	:d)

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

OFFMa	er, LLC	<u> </u>
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	1
The Articles of Organization for this Limited Liability Company Florida document number	were filed on04/08/2009	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Lim"	ited Liability Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1500 Bay Road	
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33139	Z8II
Enter new mailing address, if applicable:	1500 Bay Road, Suite 854	JUN-9 AM
(Mailing address MAY BE A POST OFFICE BOX)	Miami Beach, FL 33139	STATE 2
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	· —	er the name of the new
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 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.

f 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 **Title Name** Address **Type of Action MGRM** Tanya Marchiol 3145 E. Chandler Blvd. # 110410 ☐ Add Phoenix, AZ 85048 ✓ Remove \_\_ Remove ☐ Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) June 8th 2010 Dated Signature of a member or authorized representative of a member Jeff Glovsky Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00