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Division of Corporations

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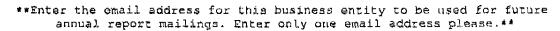
Account Name : THOMAS M. CLARK, P.A.

Account Number : 072100000445

Phone : (954)776-3800

Fax Number

: (954)776-3825



T	Address:			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OCARMAR, LLC

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S. HAWKES

JAN 6 2010

**EXAMINER** 

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T-661 P 002/003 F-811

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Ocarmar, LLC		
(Name of the Limited L (A I	iability Company as it now apper lorida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Lia. Florida document number	• • • —	July 29, 2009	and assigned
This amendment is submitted to amend the follow	ving:		題並立
A. If amending name, enter the new name of t	he limited liability company he	<u>ere</u> :	15 1
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	pany," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applical	nle:	7.7.4	<u> </u>
(Principal office address MUST BE A STREET	ADDRESS)		77
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered offi		our records, enter	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	E	nter Florida street add	dress
·		, Florida	
	City		Zip C'ode
No. 100 colors of the state of			

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 Changing Registered Agent, Signature of New Registered Agent

5-Jan-2010 -	O F Spm	From-

MGR = Manager

954-776-3825

T-661 P.003/003 F-811

If amending the Minnagers of Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGKM	I = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add PRemove
			Add of Remove
<del></del>			Tant.
<del>-</del>			□Add □Remove
			Add Remove
D. If ar		(s) here: (Attach additional sheets, if necessary.)	
		ntirety and replaced with the following:	_
	"The Company shall be managed sole	ani de Issa, 4111 Carriage Drive. #M3,	<del></del>
	Pompano Beach, FL 33069	ani de Issa, 4 111 Camage Drive. #Wo,	_
Dated _	December 29 , 20	09.	•
	flow	aupia)	
	Mari	or authorized representative of a member ila Visani de Issa or printed name of signee	

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Filing Fee: \$25.00