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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE
Account Number : 110432003053
Phone : (561)694-8107
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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2023 AUG 22 PM 3:30

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
OHC 406, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2023 / 11 / 22 AM 10:10

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OHC 406, 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 11/19/2009 and assigned Florida document number L09000111509.

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 "LLC."

Enter new principal offices address, if applicable:

2050 Coral Way, Ste 405

(Principal office address MUST BE A STREET ADDRESS)

Miami, Florida 33145

Enter new mailing address, if applicable:

2050 Coral Way, Ste 405

(Mailing address MAY BE A POST OFFICE BOX)

Miami, Florida 33145

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:

Corporate Creations Network Inc.

New Registered Office Address:

801 US Highway 1

Enter Florida street address

North Palm Beach

Florida 33408

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.



Saray Djidji, Special Secretary

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>
MGRM	Ivan Rodriguez	2050 Coral Way, Ste 405	<input type="checkbox"/> Add
		Miami, Florida 33145	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGRM	Gloria P Gomez	2050 Coral Way, Ste 405	<input type="checkbox"/> Add
		Miami, Florida 33145	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 22nd 2023

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Signature of a member or authorized representative of a member

Saray Djidji, Attorney in Fact

Typed or printed name of signee

Filing Fee: \$25.00