

L10 000 106 844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

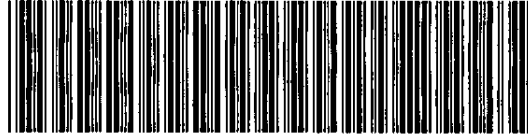
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 MAY - 1 PM 5:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Givens MAY 07 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 17, 2015

SANJAY MEHRA
10 VESCHI LANE S
MAHOPAC, NY 10512

SUBJECT: OM REAL ESTATE, LLC
Ref. Number: L10000106844

We have received your document for OM REAL ESTATE, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 215A00007694

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: OM REAL ESTATE, LLC

DOCUMENT NUMBER: L10000106844

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SANJAY MEHRA

(Name of Contact Person)

OM TAMPA HOLDINGS, LLC

(Firm/ Company)

10 VESCHI LANE SOUTH

(Address)

MAHOPAC, NY 10512

(City/ State and Zip Code)

For further information concerning this matter, please call:

SANJAY MEHRA

(Name of Contact Person)

at (917) 324 9097

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

OM REAL ESTATE, 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 October 12, 2010 and assigned Florida document number L10000106844.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

OM TAMPA HOLDINGS, LLC

The new name must be distinguishable and end with 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)

430 BUTTOW WOOD LN
BELLAIRE BLUFFS, FL 33770

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10 VESCHI LN S
MAHOPAC NY 10541

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:

430 Buttonwood Lane

Enter Florida street address

Bellaire Bluffs

City

Florida

Zip Code

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 MAY - 1 PM 5:17 PM
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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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

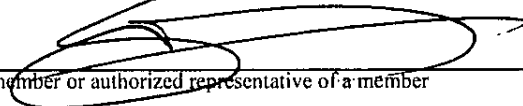
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Manjusha Mehra	14201 West Sunrise Blvd #28	☐ Add
		Sunrise, FL 33323	☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 5/1/15



Signature of a member or authorized representative of a member

SANJAY R. MEHRA

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

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15 MAY - 1 PM 5:06
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TALLAHASSEE, FLORIDA