## L1100031625

(Re	equestor's Name)	
(Ad	ldress)	<del></del>
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u> </u>		

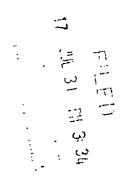
Office Use Only

2017 JUL 31 RR RE: 86



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## **COVER LETTER**

	gistration Se ision of Cor				
CUDIUST.		NE INVESTMENTS PRO LLO	2		
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.		
		ndence concerning this matter	_		
		YAMIL PAOLA LOBATO	)		
		<del></del>	Name of Person		
		OCEAN ONE INVESTME	ENTS PRO LLC		
			Firm/Company		
		685 SW 198TH TERRACI	Ε		
			Address		
		PEMBROKE PINES, FL 3	33029		
			City/State and Zip Code		
		paola_lobato@hotmail.com		report politication)	-
		E-mail address: (	to be used for future annual	report notification)	
For further in	nformation c	oncerning this matter, please ca	all:		
YAMIL PAG	OLA LOBA	го	310 918	ي	د
	Name of	f Person	Area Code	Daytime Telephone Number	
Enclosed is a	ı check for th	ne following amount:			
<b>≘</b> \$25.00 F		☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	Certificate of Status &	
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	Registrat Division Clifton B	IT/COURIER ADDRESS: tion Section of Corporations Building ecutive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OCEAN ONE INVESTMENTS PI				
(Name of the Limi	ted Liability Compa (A Florida Limited	ny as it now appears ( Liability Company)	on our records.)	<del>.</del>
The Articles of Organization for this Limited L	iability Company	were filed on $\frac{03/15}{1}$	5/2011	and assigned
Florida document number L11000031625	<del></del>			
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	f the limited liah	ility company her	2:	
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the des	ignation "LLC" or the abbrev	riation "L.L.C."
Enter new principal offices address, if applic	able:	3460 W 84TH ST		
(Principal office address MUST BE A STREE		SUITE #101		
		HIALEAH GARDENS, FL 33018		
		COS CAN LOCTELET	EDD ACE	
Enter new mailing address, if applicable:		PEMBROKE PINES, FL 33029		
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	PEMBROKE PIN	ES, FL 33029	<del></del>
			<del></del>	
B. If amending the registered agent and			our records, enter the	name of the ne
registered agent and/or the new registered o	ffice address her	<u>e</u> :		、海 四
Name of New Registered Agent:	YAMIL PAOL	A LOBATO	<del></del>	· · · · · ·
New Registered Office Address:	685 SW 198TF	H TERRACE		足り
		Enter Floride	a street address	<del>-                                    </del>
	PEMBROKE F	PINES	, Florida 33029	ကို
	<del></del>	City		Lip 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.

If Changing Registered Agent Signature of New Registered Agent

Page Tof 3

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>	Address	Type of Action
MGR	DIEGO A LOBATO	685 SW 198TH TERRACE	
		PEMBROKE PINES, FL 33029	■ Remove
			☐ Change
MGR	YAMIL PAOLA LOBATO	685 SW 198TH TERRACE	<b>.</b>
		PEMBROKE PINES, FL 33029	Remove
			☐ Change
			Remove
			Change
	<del></del>		□ Add
			☐ Remove TI
			Change
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			Remove
			☐ Change
			Remove
			☐ Change

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	<del>,,</del>	
	-	
		<del></del>
		<del></del> ,
If the date inserted in this block does iment's effective date on the Departme	ific and cannot be prior to date of filing or more than 90 ds not meet the applicable statutory filing requirement of State's records.  tive date, but not an effective time, at 1	ents, this date will not be listed
ии у 25ты	2017	
ии у 25ты	2017	- 2
d JULY 25TH	· · · · · · · · · · · · · · · · · · ·	:3
d JULY 25TH	e of a member or authorized representative of a member	·
d JULY 25TH	· · · · · · · · · · · · · · · · · · ·	

Filing Fee: \$25.00