## 111000092398

(Re	equestor's Name)	
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## **COVER LETTER**

	ation Section · 1 of Corporations		·
CHILD THE COURT	7 OCEAN ONE, LLC		
SUBJECT:	Name of L	imited Liability Company	
	icles of Amendment and fee(s) are so	_	
	ANNA LETKO		
	PH7 OCEAN ONE, LLC	Name of Person	
	3222 NE 166 STREET	Firm/Company	
	NORTH MIAMI BEAC	Address CH, FL 33160	
٠	AVBOX@BK.RU	City/State and Zip Code	
		to be used for future annual report notified	fication)
or further inforn	nation concerning this matter, please	call:	
ANNA LETKO		305 2443896 at ()	
	Name of Person	Area Code Daytime	e Telephone Number
Enclosed is a che	ck for the following amount:		
□ \$25.00 Filing	Fee \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

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**

PH7 OCEAN ONE, LLC		<u> </u>
( <u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our record ed Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Comparing document number L11000092398	any were filed on 08/11/2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3222 NE 166 STREET	
Principal office address MUST BE A STREET ADDRESS	NORTH MIAMI BEACH, FL	33160
		(2)
·		27
Enter new mailing address, if applicable:	3222 NE 166 STREET	
Mailing address MAY BE A POST OFFICE BOX)	NORTH MIAMI BEACH, FL	33160 약
s. If amending the registered agent and/or registered egistered agent and/or the new registered office address h	office address on our records ere:	1
Name of New Registered Agent: ANNA LET	KO	
New Registered Office Address: 3222 NE 16	<u>, </u>	
<del></del>	Enter Florida street addres.	s
NORTH MI	AMI BEACH FIG	orida <u>33160</u>
		/r iua

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 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>	Type of Action
MCD	EDWARD LETKO	3222 NE 166 STREET	
MGR.			
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		V	
			□ Change
	EDWARD LETKO	3222 NE 166 STREET	
AMBR			□ Add
		NORTH MIAMI BEACH, FL	Li Add
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fective date, if other than the n effective date is listed, the date mu	e date of filing:		(optional)	405 <b>03</b> 0
the creetive date is listed, the date muster. If the date inserted in this becament's effective date on the D	lock does not meet the appli	cable statutory filing requ		
record specifies a delaye The 90th day after the rec	d effective date, but n cord is filed.	ot an effective time,	at 12:01 a.m. on the ea	arlier o
ted	,	/		
		An		_
	Signature of a member or aut	horized representative of a m	ember	

Page 3 of 3

Filing Fee: \$25.00