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EXAMINER

COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
SUBJECT: OSE Diaz Installations LLC. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Margaret Diaz Name of Person Jose Diaz Installations Firm/Company
1862 Dauch DR. Address
Clearwater Fl. 33763 City/State and Zip Code
idiaz 110 everizon net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Marcoret Diaz at (727) 637-3579 Name of Person Area Code & Daytime Telephone Number SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
Enclosed is a check for the following amount:
Enclosed is a check for the following amount: \$\simegrightarrow{\text{S25.00 Filing Fee}} \text{ \$\simegrightarrow{\text{S55.00 Filing Fee} & \text{ \$\cent{Certified Copy} & \$\cent{C
MAILING ADDRESS: Registration Section Division of Corporations 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

Jose Diaz Inst	allations LL	C.	
(Name of the Limited Liabilit (A Florida	y Company as it now appears of Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability (Florida document number L/2000)	Company were filed on $\frac{1-a}{13}$	25-12	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company here:		
The new name must be distinguishable and end with the wo	ords "Limited Liability Company	," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:	***************************************		<u> </u>
(Principal office address MUST BE A STREET ADD	RESS)		
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Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·		<u>ω</u>
(Mailing address MAY BE A POST OFFICE BOX)		(A)	
		- -1	
		_08	
B. If amending the registered agent and/or registered agent and/or the new registered office aderes agent.		r records, enter the	mamerof the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	Florida street addres	s
		, Florida	
	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 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

Page 1 of 3

MGR = Manager MGRM = Managing Member **Title Address Type of Action Name** MGRM Mario OROffsa Remove Remove Add Remove

. If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

or Managing Member being added or removed from our records:

). If a	mending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
	, ,	
ated_	1/28	<u>, 2013</u> .
		Margaret Diar
		Signature of a member or authorized representative of a member
		Margaret Diaz Typed or printed name of signee
		n 2 -62

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Filing Fee: \$25.00

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