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12 APR 24 AM 11: 36

APR 2 5 2012 T. HAMPTON

COVER LETTER

TO: Reg Div	istration Section is section of Corpor	on e s	a de	A STATE OF THE STA	
SUBJECT:		∵ Oasis Finan	cial Enterprises, LLC		
SUBJECT:			ited Liability Company		
The enclosed	l Articles of Am	nendment and fee(s) are su	bmitted for filing.		
Please return	all corresponde	ence concerning this matte	r to the following:		
	•		Howard Conner Name of Person		
			Name of Coson		
	_	Oasis	Financial Enterprises, LL	.C	
			Firm/Company		
		382	29 Brampton Island Ct N		
	•	· · · · · · · · · · · · · · · · · · ·	Address		
		J	acksonville FL 32224		
	_		City/State and Zip Code	_	
	_	ho	dconner@comcast.net		
			to be used for future annual report no	outication)	
For further ir	iformation conc	erning this matter, please	call:		
	Howa	rd Conner	at (_904_)	223-7880	
Name of Person		Area Code & Dayı	time Telephone Number	_	
Enclosed is a	check for the fo	ollowing amount:			
√] \$25.00 Fi	ling Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sed) \$60.00 Filing For Certificate of Sed) Certified Copy (additional copy	Status &

MAILING ADDRESS:

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

SECRETARY OF STAFE DIVISION OF CORPORATIONS

12 APR 24 AMII: 36

	Oasis Financi	al Enterprises, L	LC	
(<u>Na</u>	me of the Limited Liability Co (A Florida Limi	mpany as it now appea ted Liability Company)	rs on our records.)	
The Articles of Organization f	or this Limited Liability Com	pany were filed on	03/05/12	and assigned
Florida document number	L12000032794			
This amendment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited	liability company her	<u>re</u> :	
The new name must be distingui "L.L.C."	shable and end with the words "	Limited Liability Comp	any," the designation "	LLC" or the abbreviation
Enter new principal offices a	ddress, if applicable:			
(Principal office address MU)	ST BE A STREET ADDRES.	<u>S)</u>		
Enter new mailing address, i	f annliaghlar		•	
(Mailing address MAY BE A	• •			
			•	
B. If amending the registe registered agent and/or the n			our records, <u>enter</u>	the name of the new
Name of New Regist	ered Agent:			
New Registered Office	ce Address:	En	tar Florida stract ada	lvass
		Enter Florida street address		
		City	, Florida	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

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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGMR	Justin Hannah	4907 Bayshore Blvd Tampa FL 33611	Add Remove
	·		Add Remove
······································			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change(s	here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE DIVISION OF CORPORATION 136
Dated	April 19 , 2012 Signature of a member or	2	
		ward Conner printed name of signee	

Page 2 of 2

Filing Fee: \$25.00