#1300002205

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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K. SALY EXAMINER JAN 1 0 2013

COVER LETTER

TO: Registration Section ' Division of Corporations
SUBJECT: OXX Property Canacement, UC 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:
Derc Tokotsky Name of Person Chyx Roperty Management, UC Firm/Company 3Cel S Henry Aue Address City/State and Zip Code City/State and Zip Code Derc Xotic Orean Cars. con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Deric Tirotsky at (732 995 - 2330) Name of Person at (732 995 - 2330) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$\int_{\text{S}}^{\text{S}} 25.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)}} \$\int_{\text{S}}^{\text{S}} 60.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{\text{S}}^{\text{S}} 60.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{\text{S}}^{\text{S}} 60.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{\text{S}}^{\text{S}} 60.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{\text{S}}^{\text{S}} 60.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\int_{\text{S}}^{\text{S}} 60.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}

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

13 JAN -9 PM 4: 44

ALVAHASSE CSTATE

OSTATE

OSTATE

Zip Code

(Name of the Limited Liability Gompa (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L130000 220</u> .5	were filed on 01-04-13 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab The new name must be distinguishable and end with the words "Limi" L.L.C."	MT, LLC
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Deric Tikotsky 3015 Henry Ave West Palm Beach, FC 33405
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3AME
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address

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.

City

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□
<u> </u>			Add
			Remove
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		-	Remove
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			Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
Please Change our Company name to Onlyx Property Momit, U.C.		
That you-	_	
Dated 0 - 0 Co - 2013	-	
Signature of a member or authorized representative of a member		
Deric TPKOts Ky Typed or printed name of signee		
Page 3 of 3		
Filing Fee: \$25.00		

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