## 1300062162

(Re	questor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to 9/1/17		

Office Use Only



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08/31/17--01028--024 ++25.00



S. WARREN SEP 0 1 2017

## **COVER LETTER**

TO: Registration Sec Division of Corp			
ONE OCEA	N 405, LLC.	·	
SUBJECT:	Name of Limi	ited Liability Company	
	mendment and fee(s) are sub-	_	
,	ALEJANDRO D GRAVIE	- -	
		Name of Person	
	HLB GRAVIER LLP		
		Firm/Company	
	396 ALHAMBRA CIRCLI	E SUITE 900	
		Address	<del></del>
	CORAL GABLES, FL 331	34	
	-	City/State and Zip Code	<del></del>
	PRODRIGUEZ@HLBGRA		<del> </del>
		o be used for future annual report notif	ication)
For further information cor	ncerning this matter, please ca	ill:	
ALEJANDRO GRAVIER		305 446-3022	
Name of I	Person	at () Area Code Daytime	Telephone Number
Enclosed is a check 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:

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 OT ARTICLES OF ORGANIZATION **OF**

( <u>Name of the Limited L</u> (A F	lability Company as it now appears on our records.) lorida Limited Liability Company)
The Articles of Organization for this Limited Liabil	lity Company were filed on and assigned
Plorida document number L13000062162	
his amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the	e limited liability company here:
he new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:
Principal office address MUST BE A STREET A	DDRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BO	<b>V</b> )
Mailing address MAY BE A POST OFFICE BO	<u> </u>
3. If amending the registered agent and/or i	registered office address on our records, enter the name of the n
B. If amending the registered agent and/or egistered agent and/or the new registered office	registered office address on our records, enter the name of the r
s. If amending the registered agent and/or i	registered office address on our records, enter the name of the
B. If amending the registered agent and/or of egistered agent and/or the new registered office	registered office address on our records, <u>enter the name of the raddress here</u> :
Name of New Registered Agent:	registered office address on our records, enter the name of the r

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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 Rethstered 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>	Address	Type of Action
MGR	Energy Capital Management and C	c/o 396 Alhambra Circle Suite 900	<b>≅</b> Add
	Consulting; Lice	Coral Gables, FL 33134	
			Change
MGR	GF Developers Group LLC	396 Alhambra Circle Suite 900	Add
		Coral Gables, FL 33134	■ Remove
			Change
			□ Remove
			Change
			□ Remove
			Change
			TEAUG 3 PHE D  SCURE TO STATE  ALL AHAS SEE, FLORIDA
			ORDA   Remove
			Change

Effective date, if other than the date of filing:	

Filing Fee: \$25.00