

L13000073375

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

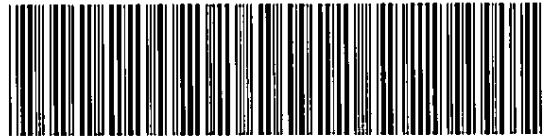
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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FILED  
2018 MAY 14 PM 2:46  
TALLAHASSEE FLORIDA

MAY 17 2018  
J. HARRIS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Oceanside Management Of Key West 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:

Mike Bender  
\_\_\_\_\_

Name of Person

Oceanside Management Of Key West LLC  
\_\_\_\_\_

Firm/Company

5950 Peninsular Ave  
\_\_\_\_\_

Address

Key West FL 33040  
\_\_\_\_\_

City/State and Zip Code

mbender@oceansedgekeywest.com  
\_\_\_\_\_

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike Bender  
\_\_\_\_\_

305 360-2909  
at ( )  
Area Code Daytime Telephone Number

Name of Person

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  
TO  
ARTICLES OF ORGANIZATION  
OF**

Oceanside Management Of Key West LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/20/2013 and assigned  
Florida document number L13000073375.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Same

The 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:

Same

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

Same

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Mike Bender

New Registered Office Address:

5950 Peninsular Ave

*Enter Florida street address*

Key West

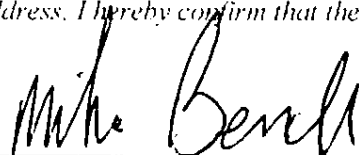
Florida 33040

*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 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>                 | <u>Type of Action</u>                      |
|--------------|---------------|--------------------------------|--|
| MGRM         | Singh, Pritam | P.O Box 2039 Key West Fl 33045 | <input type="checkbox"/> Add               |
|              |               |                                | <input checked="" type="checkbox"/> Remove |
|              |               |                                | <input type="checkbox"/> Change            |
| VP           | Singh, Jiwn N | 1010 Kenedy Dr                 | <input type="checkbox"/> Add               |
|              |               | Key West Fl 33040              | <input checked="" type="checkbox"/> Remove |
|              |               |                                | <input type="checkbox"/> Change            |
| MGRM         | Bender, Mike  | 5950 Peninsular Ave            | <input checked="" type="checkbox"/> Add    |
|              |               | Key West Fl 33040              | <input type="checkbox"/> Remove            |
|              |               |                                | <input type="checkbox"/> Change            |
| VP           | Mais, Simon   | 10 E 53rd St, 31st Floor       | <input checked="" type="checkbox"/> Add    |
|              |               | New York NY 10022              | <input type="checkbox"/> Remove            |
|              |               |                                | <input type="checkbox"/> Change            |
|              |               |                                | <input type="checkbox"/> Add               |
|              |               |                                | <input type="checkbox"/> Remove            |
|              |               |                                | <input type="checkbox"/> Change            |
|              |               |                                | <input type="checkbox"/> Add               |
|              |               |                                | <input type="checkbox"/> Remove            |
|              |               |                                | <input type="checkbox"/> Change            |

2008 MAY 4 PM 2:48  
 EASTMAN KODAK COMPANY  
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[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 5-9 2018  
  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member  
  
Mike Bender  
 \_\_\_\_\_  
 Typed or printed name of signer

**Filing Fee: \$25.00**

2018 MAY 14 PM 2:46  
FBI  
ST. LOUIS, MO  
FBI MISSOURI  
FBI ST. LOUIS