Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000034615 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: PAUL SALVER, P.A.

Account Number : I20020000087

: (954)389-1333

Phone Fax Number

: (954)389-1397

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Fmail	Address:		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GRUPO OCEAN LLC**

0.00	
Certificate of Status	
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Jh5 1-30-19

Electronic Filing Menu

Corporate Filing Menu

Help

~ (((H19000034615 3)))

## **COVER LETTER**

GRUPO OG SUBJECT:	BAN LLC		
20091X71:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and foc(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	DANIELLA SANTANA		
		Name of Person	
	SALVER&COOK LLP		
		Firm/Company	<del></del>
	2721 EXECUTIONE PAR	K DR STE 4	
		Address	
	WESTON, FL 33331		
	D.SANTANA@PSCCPAS	City/State and Zip Code .COM	<u>.                                      </u>
	E-mail address: (	to be used for future annual report notif	cation)
For further information c	oncerning this matter, please c	ult:	
DANIELLA SANTANA		954 3891333 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
	6.0		
Enclosed is a check for the	•	FI CCC OO PILLA PAR P	CL \$60.00 Filing Fee
S25.00 Filing Fee	□ \$30.00 Filing Feo & Certificate of Status	(additional copy is coolosed)	CI \$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

GRUPO OCEAN LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on Limited Liability Company)	pur records.)
The Articles of Organization for this Limited Liability C Florida document number £13000147704	ompany were filed on <u>10/21/2</u> 	013 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
		N. 2018
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	(ESS)	
	-	
Enter now malting address, if applicable:	<u></u>	The B
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>	077
		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office add  Name of New Registered Agent:	tered office address on ou ress here:	r records, <u>enter the name of the ne</u>
New Registered Office Address:	Enter Floridu s	Irnal addyati
	Clty	, Florida
New Registered Agent's Signature, if changing Registere	•	,
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	and agree to act in this cape omplete performance of my gent as provided for in Chap ed office address, I hereby co	duties, and I am familiar with and over 605, F.S. Or, if this document is
	If Changing Registered Agent,	Signature of New Registered Agent

Page 1 of 3

(((H190000346153)))

(((H190000346153)))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person beingladded or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u> VANESSA PIEDRAHITA	Address 2721 EXECUTIVE PARK DR	Type of Action
AMBR			□ Add
		STE 4	Remove
		WESTON, PL 33331	
			Change
MGR	VANESSA GAGLIOLO	1240 NE 153 STREET	B Add
			☐ Remove
		MORTH MIAMI BEACH, FL 33162	☐ Change
		<u> </u>	D Add
			□ Rедюче
			□ Change
			Dbb 🗀
			D Emove
			AHASSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS
			DAMO DE
			Remove
			Change
		<del></del>	
			□ Remove
			Change

(((H19000034615 3)))	
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
2019 ALC: 19	
	_
	r
	ſ
#-9:-1-0	•
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  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.	
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.	
Dated JANUARY 28TH , 2019	
Signature of a member of authorized representative of a member	
VANESSA PIEDRAHITA  Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00