

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
 Account Number : 110432003053
 Phone : (561)694-8107
 Fax Number : (561)214-8442

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
OCPBC INVESTMENTS, LLC

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

2022 JUN -9 PM 3:04

2022 JUN -9 AM 9:29

APPROVED
AND
FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OCPBC Investments, 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 November 6, 2013 and assigned
Florida document number L13000155896.

This amendment is submitted to amend the following:

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

10275 Hagen Ranch Road, LLC

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:

10275 Hagen Ranch Road

(Principal office address MUST BE A STREET ADDRESS)

Boynton Beach, FL 33437

Enter new mailing address, if applicable:

Plotnik, Feinberg & Associates, P.C., Attn: Bruce Plotnik

(Mailing address MAY BE A POST OFFICE BOX)

27313 Southfield Road

Llathrup Village, MI 48076

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:

Corporate Creations Network Inc.

New Registered Office Address:

801 US-1

Enter Florida street address

North Palm Beach

Florida 33408

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.



Ashley Perkins, Special Secretary

If Changing Registered Agent, Signature of New Registered Agent

2022 JUN - 9 AM 9:29
FILED
APPROVED

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	John Levin	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input checked="" type="checkbox"/> Remove
		Atlantis, FL 33462	<input type="checkbox"/> Change
MGRM	Gerard D'Ariano	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input checked="" type="checkbox"/> Remove
		Atlantis, FL 33462	<input type="checkbox"/> Change
MGRM	Charles W. Graubert	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input checked="" type="checkbox"/> Remove
		Atlantis, FL 33462	<input type="checkbox"/> Change
MGRM	Theresa Rattey	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input checked="" type="checkbox"/> Remove
		Atlantis, FL 33462	<input type="checkbox"/> Change
MGRM	Michael A. Cohn	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input checked="" type="checkbox"/> Remove
		Atlantis, FL 33462	<input type="checkbox"/> Change
MGRM	Jeffrey Rosenfield	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input checked="" type="checkbox"/> Remove
		Atlantis, FL 33462	<input type="checkbox"/> Change

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	Ezra Berkowitz	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input checked="" type="checkbox"/> Remove
		Atlantis, FL 33462	<input type="checkbox"/> Change
MGR	Marvin Kohn	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input type="checkbox"/> Remove
		Atlantis, FL 33462	<input checked="" type="checkbox"/> Change
MGR	James Clancy	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input type="checkbox"/> Remove
		Atlantis, FL 33462	<input checked="" type="checkbox"/> Change
MGR	Gary Richman	180 JFK Drive	<input type="checkbox"/> Add
		Suite 100	<input type="checkbox"/> Remove
		Atlantis, FL 33462	<input checked="" 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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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 605.6207 (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 April

8 _____, 2022
Mani Akh

Signature of a member or authorized representative of a member

Marvin Kohn

Typed or printed name of signee

Filing Fee: \$25.00