

140000 27681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

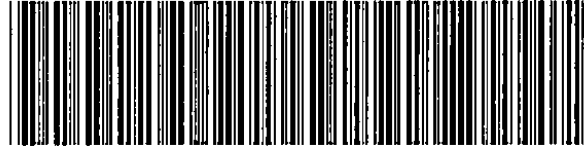
(Business Entity Name)

(Document Number)

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12/20/19--01011--030 ♦♦25.00

12/20/19 12:00 PM  
19 DEC 20 PM 3:01

JAN 24 2020  
C McNAIR

Registration Section  
Division of Corporations

ELECT: Onenetspace LLC  
Name of Limited Liability Company

closed Articles of Amendment and fee(s) are submitted for filing.

return all correspondence concerning this matter to the following:

Edo Nakdimon  
Name of Person

One Net Space  
Firm/Company

6586 Hypoluxo Road Suite 274  
Address

Lake Worth, FL 33467  
City/State and Zip Code

edo@onenetspace.com  
E-mail address: (to be used for future annual report notification)

ther information concerning this matter, please call:

Edo Nakdimon at (561) 405-5986  
Name of Person Area Code Daytime Telephone Number

ed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> \$5.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

19 DEC 20 PM 3:01  
TALLAHASSEE, FL 32303  
DIVISION OF CORPORATIONS

TO  
ARTICLES OF ORGANIZATION  
OF

Onenetspace llc

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

RECEIVED  
19 DEC 20 PM 3:01  
CLERK OF THE CIRCUIT COURT  
IN AND FOR THE COUNTY OF DADE  
FLORIDA

Articles of Organization for this Limited Liability Company were filed on 2/18/14 and assigned  
a document number L14000027681.

An amendment is submitted to amend the following:

**Amending name, enter the new name of the limited liability company here:**

Every name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**new principal offices address, if applicable:**

**Principal office address MUST BE A STREET ADDRESS**

**new mailing address, if applicable:**

**Mailing address MAY BE A POST OFFICE BOX**

**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:

Arielle Nakdimon

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

**Registered Agent's Signature, if changing Registered Agent:**

I 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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is amended 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.

Arielle Nakdimon

If Changing Registered Agent, Signature of New Registered Agent

**= Manager**  
**R = Authorized Member**

**R = Authorized Member**

**Type of Action**

6586 Hypoluxo Rd Suite 274  
Lake Worth, FL 33467

~~13 Add~~

☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change

Filing Fee: \$25.00