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.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CORP USA

Account Number: 072450003255

: (305)634-3694

Fax Number

: (786)409-5946

**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 ONE MARICIA NOEL LLC

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

EFFECTIVE DATE

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Help

8/18/2014

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CORPUSA

9696889998 08/18/5014 15:05





COVER LETTER

TO:

Registration Section Division of Corporations

One Maricia Noel 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:

Leonard A. Weiss Name of Person One Maricia Noel LLC 3072 NW 60th Street

Address

Boca Raton, FL 33496

City/State and Zip Code

law3517@aol.com

E-mail address: (to be used for future mouth report notification)

For further information concerning this matter, please call:

Leonard A. Weiss

at (954-) 661-6102

Area Code Daytime Telepho

Name of Person

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is unclosed)

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Ciffion Building 2661 Executive Center Circle Tailahassee, FL 32301

EFFECTIVE DATE 8/18/14

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

One Maricia Noel LLC	<u> </u>	<u> </u>
(Name of the Limited Liability Company (A Florida Limited L	ny as il now appours on our recor- isbility Company)	ds.)
The Articles of Organization for this Limited Liability Company Florida document number L14000096685	were filed on June 16 201	4 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and end with the words "Limited Linbi	ility Company," the designation "Li	.C' or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		20
		ASSSI ASSSI
Enter new mailing address, if applicable:		3 17
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		is enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Erder Florida street addre	S.S.
		lorida
	City	Zip Code

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 filled 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.

EFFECTIVE DATE 8/18/14

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

AMBR = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Leonard A. Weiss	3072 NW 60th Street	= Add
		Boca Raton, FL 33496	□ Remove
			_
MGR	C.J.Noel	2800 Davis Blvd	
		Suite 208	Remove
		Naples, FL 34104	_
AMBR	C.J.Noel	2800 Davis Blvd	D Add
		Naples, FL 34104	■ Remove
			D Add
			Remove
			Martin I.
			☐ Remove
			= [] H 9: Q F STATE: FLORIDA
t	Page	2 ur 3	会会 一

MGR = Manager

D.). If amending any other	er information, enter change(s) here: (Attach additional sheets, if necessary.)					
	· · · · · · · · · · · · · · · · · · ·						
E.	(the stiactive date must be:	er than the date of filing: August 18, 2014 (optional) specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days offer lited by the Florida Department of State)					
	Dated Augu	ust 13 2014					
		Twee Halur					
	Lonnoi	Signature of a member or authorized representative of a member					
	Leonal	Leonard A. Weiss Typed or printed name of signed					

Page 3 of 3

Filing Fee: \$25.00