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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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: (407)932-0040

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

Email Address:\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OCV GLOBAL INVESTMENTS LLC

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Electronic Filing Menu

Corporate Filing Menu

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## COVER LETTER

TO: Registration Section Division of Corporations OCV GLOBAL INVESTMENTS LLC SUBJECT: 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: RODOLFO RENWICK Name of Person OCV GLOBAL INVESTMENTS LLC Firm/Company 15\$2 NATURE TRAIL Address KISSIMMEE, FL 34746 City/State and Zip Code E-mail address (to be used for future annual report notification) For further information concerning this matter, please call: RODOLFO RENWICK Name of Person Arca Code Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25.00 Filing Fee 🗆 \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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

	GLOBAL INVESTMENTS		
(Name of the Limited	Hability Company as it now appear fords Limited Liability Company)	rs on our records.)	<del></del>
(A	Horica Limited Liability Company)		
The Articles of Organization for this Limited Liab Florida document numberL15000040989	ility Company were filed on	03/05/2015	and assigned
Plottua document number	<del> </del>		
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of th	limited liability company he	ere:	
ROD	OLFO RENWICK LLC		
The new name must be distinguishable and end with the wor	s "Limited Liability Company," the	designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable	<u></u>		
(Principal office address MUST BE A STREET	DDRESS)	Şir	Čr.
		4.70	<u></u>
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	₩	<b>5</b>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	<del></del>	
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		e de la companya de l	2> N
B. If amending the registered agent and/or	registered office address on	our records enters	77.6
registered agent and/or the new registered office		ite itemas checke	ine wante of the ke
Name of Name Devices at 6 and	<u> </u>		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida street address	
!		. Florida	
-	City	,	Zip Code
New Popietered Agent's Signature if shanning Des	L		

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

Page I of 3

Authorized	i Member heing added or remov	ed from our records:	
MGR = 3 AMBR = 3	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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D. If amending any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)		
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		<del></del>	
the date this document is filed by the Florida Department	ii		
Dated MARCH 10	Str. Romusch		
Signature of a m	mber or authorized representative of a member		-
F	ODOLFO RENWICK		
	yped or printed name of signee		~
	Page 3 of 3 Filing Fee: \$25.00	15 MAR 10 AM	eriore Sarano Sarano E
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