L15006110F97

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300285289483

05/20/16--01020--017 **25.00



COVER LETTER

TO: Registration Section Division of Corpora			
SUBJECT: OCC	ON DIKE LA		
	Name of Limited Liability Co	mpany	
The enclosed Articles of Ame	endment and fee(s) are submitted for filin	g.	2016
Please return all corresponder	ice concerning this matter to the following	g:	F
_	GINA 1	Brin.	
	Ocean B	Person / Le LL C	<u>ب</u> 2
•	Firm/Co	mpany	
	4300 NW	114 mg	
_	SUNNISE F	1 3332	3 ,
_	City/State and CEPN b)	Le HC @	640Àl.
T	·	ше анции тероп пописацов)	
For further information conce	rning this matter, please call:		,
Name of Per	Son at (2)	Code Daytime Telepho	434 one Number
Enclosed is a check for the fo	Dougna amount:		
	_	Silver For Pr	\$40.00 Elling Egg
□ \$25.00 Filing Fee □	Certificate of Status Certifie		\$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

<u> Oceano</u>	131KE LL	~	
(Name of the Limit	ted Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited L Florida document number <u>L/5-000 //</u>	iability Company were filed on $\underline{\mathscr{Q}}$	6/26 /20/5 and assig	gned
This amendment is submitted to amend the foll			
A. If amending name, enter the new name of the second seco	f the limited liability company he CORDON HATER	re: ial Co., Ltd. USA	210
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the de	esignation "LLC" or the abbreviation "L.L.	C."
Enter new principal offices address, if applic	able:	·	
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:		JUL 1	
(Mailing address MAY BE A POST OFFICE	BOX)	က် က	
B. If amending the registered agent and/ registered agent and/or the new registered of		our records, enter the name of	f the new
Name of New Registered Agent:	GINA Pi	lar de Laudle	· Velez
New Registered Office Address:	4300 NW //4) Enter Flor	NC ida street address	
	SUDNISE	, Florida 3332 Zip Code	23

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 4-of 3

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

Type of Action <u>Title</u> **Name** <u>Address</u> TREASURER John Robert Perenson 4300 NW 114 AVE Supple F/ 33323 _□ Change ☐ Add ☐ Remove □ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

				6
			ASSEE	<u></u>
				<u> </u>
			0,7 ,	্ৰত
	- 1 AVE 1 - 2 S			
Effective date, if other	r than the date of filing:		(optional)	
If an effective date is listed,	r than the date of filing: the date must be specific and canno ed in this block does not meet th	t be prior to date of filing or mor	e than 90 days after filing.) Pursu	ant to 605.02

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00