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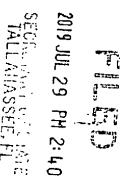
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Mr. 3.7 July

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Oceans Deep Investments 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:
Kelsey Dickinson
Oceans Deep Investments LLC Firm/Company
14032 Keyline Blvd.
Loxahatchee, FL 33470
City/State and Zip Code Kelsmal@Me. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kelsey Dickinson at (561) 906-8266 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Salution Status Solution Status Solution Solution Status Solution S

MAILING ADDRESS:

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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

ocean	is beef) INVESTANCE	MIS LLC	
(Name of the Limit	ted Liability Comp (A Florida Limited	pany as it now appears on o i Liability Company)	our records.)	
The Articles of Organization for this Limited L Florida document number	iability Compan	y were filed on 10/0	08 70 15 and assign	ned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited lia	bility company here:		
The new name must be distinguishable and contain the v	vords "Limited Lial	bility Company," the designa	ation "LLC" or the abbreviation "L.L.C	
Enter new principal offices address, if applicable:		NA		
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent: New Registered Office Address:	/or registered		SECSLIVE 29 PM 2: FALLAHASSEE, F.	the new
		Enter Florida str	reet address	
		·	, Florida	
		City	Zip Code	
New Registered Agent's Signature, if changing	Registered Agen	<u>t:</u>		
I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as registering filed to merely reflect a change in the	per and complet istered agent as	te performance of my a s provided for in Chapt	luties, and I am familiar with a ter 605, F.S. Or, if this docume	and

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this 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>	Name	Address	Type of Action
MGR	Jonathan Dicki	nson 14032 Keylin	ne Blud to Add
		nson 14032 Keylin Loxahatchee, FL 3	3470 KRemove
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Effect	ve date, if other than the date of filing: (optional)
lf an efl	ective 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 605.0207
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docum	ent's effective date on the Department of State's records.
he red	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
	90th day after the record is filed.
.	Tulu 25 2019
Dated	<u> </u>
	K. Land Old School and
	1) I DUANT (C/NOO)
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00