

L15000 206847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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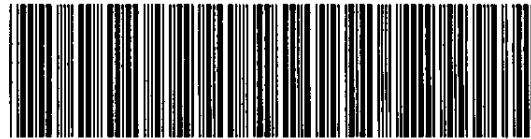
(Business Entity Name)

(Document Number)

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18 APR 16 AM 7:14

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APR 18 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Oasis 41, 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:

Douglas W. Grissinger

Name of Person

Mellor, Grissinger & Backo, LLP

Firm/Company

13801 Tamiami Trail, Suite D

Address

North Port, FL 34287

City/State and Zip Code

Doug@NorthPortLaw.com

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

For further information concerning this matter, please call:

Douglas W. Grissinger

941 426-1193
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$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

Oasis 41, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12/11/15 and assigned
Florida document number L15000206847.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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B. If 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:

Douglas W. Grissinger

New Registered Office Address:

Mellor, Grissinger & Backo, LLP 13801 Tamiami Trail, Suite D

Enter Florida street address

North Port

, Florida 34287

City

Zip Code

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

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	James Grifoni	9995 Tamiami Trail E	<input type="checkbox"/> Add
		Naples, Florida 34113	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jared Grifoni	9995 Tamiami Trail E	<input type="checkbox"/> Add
		Naples, Florida 34113	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Dominick D'Agostino	490 Foxon Blvd.	<input checked="" type="checkbox"/> Add
		New Haven, CT 06513	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Vincent Porzio	771 Watertown Rd.	<input checked="" type="checkbox"/> Add
		Middlebury, CT 06762	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(If an effective 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 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated Apr 11, 2018

 Signature of _____

Signature of a member or authorized representative of a member

Douglas W. GRISSINGER, authorized representative of members
Typed or printed name of signer