LICEDER COMPONENTS

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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SCORETARY OF STATE

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APR 2 2 2016

S. YOUNG

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: O.C	· Enderprises U Name of Lin	.S.A. LLC nited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Billee Ha	Name of Person	
	O.C. Enterpri	ises U.S.A. LLC Firm/Company	APR 21
	921 N.W 54	th Street Address	PH 2: 0
	Mjami, Flor	City/State and Zip Code	
	Owcommunity E-mail address:	staffing e amail, com to be used for fuelre annual report notice	ication)
For further information c	oncerning this matter, please c	all:	- · · ·
Phillip Bai	f Person	at (<u>786</u>) <u>715 - 5</u> Area Code Daytime	(cell) 5429 or (305) 758-9641 Telephone Number
Enclosed is a check for the	ne 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

O. C. Errterprises US (Name of the Limited Liability Co	ompany as it now appears on our records.)	
(A Florida Lim	nited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on 2 8 2016	and assigned
Florida document number <u>L 1600026690</u> .		
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 l	Liability Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		17 SE
(Principal office address MUST BE A STREET ADDRES)	<u>S)</u>	
		表表示
		- STATE
Enter new mailing address, if applicable:		R
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
Mutting unitess MAT DE ATOST OFFICE BOX		<u> </u>
	-	
B. If amending the registered agent and/or registere	ed office address on our records enter th	ne name of the new
registered agent and/or the new registered office address		ic name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 = M $AMBR = A$	Ianager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
Mar	Phillip Bain	821 N.W. 54th SKEET	🗹 Add
		Miani, Florida 33127	Remove
			Change
MGB	Joe Scott	821 N.W. 54th Street	🗆 Add
		Mjami, FLORINA 33127	☑ Remove
			SECRETAILY OF STATE TALLAHASSEE, FLOTIA Change Change Change Change Change Change Change
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ective date, if other than the effective date is listed, the date me: If the date inserted in this lument's effective date on the freecord specifies a delayer and the country of the coun	ust be specific and co plock does not me Department of Sta ed effective da	annot be prior to et the applicabl ite's records.	e statutory filing	requirements, this	nal) iling.) Pursuant to 605 date will not be liste	5.02 ed a
he 90th day after the re	cord is filed.					
- Februari	8 ^{-1h} ,	2016				
ea_ j	-> N	15-17)			

Page 3 of 3

Filing Fee: \$25.00