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COVER LETTER

то	P: Registration S Division of Co			
CIT		NHATTAN 13 LLC		
30.	H &O MANHATTAN 13 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: DANY ABRAHAM Name of Person KSDT & COMPANY Firm/Company 1625 N. COMMERCE PKWY SUITE 315 Address WESTON, FL 33326			
Thε	e enclosed Articles of	Amendment and fce(s) are sub	mitted for filing.	
Plea	ase return all corresp	ondence concerning this matter	to the following:	
		DANY ABRAHAM		
			Name of Person	
		KSDT & COMPANY		
			Firm/Company	
1625 N. COMMERCE PKWY SUITE 315				
		<u> </u>	Address	
		WESTON, FL 33326		
			City/State and Zip Code	
		DABRAHAM@KSDT-CPA		
		E-mail address: (to be used for future annual report noti	fication)
For	further information of	concerning this matter, please co	all:	
DA	NY ABRAHAM		305-670- 3370 at ()	
	Name o	of Person	at () Area Code Daytim	e Telephone Number
Enc	closed is a check for t	he 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

H & O MANHATTAN 13 LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
he Articles of Organization for this Limited Liability Comp	pany were filed on 3/30/2016	and assigned
orida document number L16000063394		
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited	liability company here:	
OFUND 10 LLC		
e new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" o	r the abbreviation "L.L C."
nter new principal offices address, if applicable:		est.
, , , , , , , , , , , , , , , , , , , ,	~	400
rincipal office address MUST BE A STREET ADDRESS	<u> </u>	
		و پ
nter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE BOX)		مِ شِرْ
		GO GO
	· - · · · · · · · · · · · · · · · · · ·	·
If amending the registered agent and/or registere gistered agent and/or the new registered office address		enter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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 = V $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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effective date is listed, the date must be e: If the date inserted in this block iment's effective date on the Depa	does not meet the ap	plicable statutor	g or more than 90 day y filing requiremen	ys after filing.) Purs ts, this date will i	uant to 605.020 not be listed a
record specifies a delayed el ne 90th day after the record		not an effect	tive time, at 12	:01 a.m. on t	he earlier c
MARCH-20	, 2017	<u></u>			
		/			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00