4/600012/202

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7 JUN 23 PM 3: 02
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S. WARREN JUN 2 6 2017

COVER LETTER

TO: Registration Division of C	Section Corporations	•	
	EVESTMENTS LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	OSNAT HAY		
		Name of Person	
	OEH INVESTMENTS LL	С	
		Firm/Company	·
	7366 NW 34TH STREET		
		Address	
	LAUDERHILL, FL 33319		
		City/State and Zip Code	
	ASITRISH@BELLSOUTH	.NE Γ to be used for future annual report notif	iestias)
For further information	on concerning this matter, please ca		Name:
OSNAT HAY		516 808-1836 at ()	
Nan	ne of Person	at ()	Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Fiting 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, Ft. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OEH INVESTMENTS LLC	
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number <u>L16000121202</u>	ompany were filed on 06/23/2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and contain the words "Limi	ted 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 ADDR	ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	ered office address on our records, <u>enter the name of the new</u> ress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Tin Coda

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 pocument 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 $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Change
			☐ Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
			Remove
			Change
			Similar Remove
			□ Change

EDWARD HAY- (CHANGE	50 UNITS TO 1 UNIT)	
		
		
	Providence of the state of the	
tive date, if other than the	date of filing: be specific and cannot be prior to date of tiling or more than 90	(optional)
: If the date inserted in this blo	ock does not meet the applicable statutory filing requiren	
ment's effective date on the De	partment of State's records.	
ecord specifies a delayed	effective date, but not an effective time, at	12:01 a.m. on the earl
e 90th day after the reco	ord is filed.	12.01 dim. on the cur
HAVE 10	2017	
JUNE 19	2017	· 第八 言
J		·, ~
		<u> </u>
·	Signature of a member or authorized representative of a memb	JUN 2

Page 3 of 3

Filing Fee: \$25.00