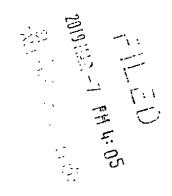
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COVER LETTER

	Registration Sec Division of Corp					
	Defray Spac	cious Oasis, LLC				
SUBJEC	f:	Name of Lim	ited Liability Company			
The enclo	sed Articles of :	Amendment and fee(s) are sub	mitted for filing.			
Please reti	urn all correspo	ndence concerning this matter	to the following:			
		Rosemary R. Karner				
			Name of Person			
		Delray Spacious Oasis, LL	.C			
McHenry, IL 60050-4973						
City/State and Zip Code rrkarner@gmail.com E-mail address: (to be used for future annual report notification)						
rrkarner@gmail.com						
		E-mail address: (to be used for future annual report notifi	cation)		
For furthe	r information co	oncerning this matter, please ca	aff:			
Rosemary	R. Karner		815 701-6986			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed i	is a check for th	e following amount:				
S25.00) 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:

TO:

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

and assigned Delray Spacious Oasis, 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 August 26, 2016 Florida document number L16000160169 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SE Florida Spacious Oasis, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 808 SE 14th DR Enter new principal offices address, if applicable: Deerfield Beach, Fl. 33441-7215 (Principal office address MUST BE A STREET ADDRESS) Rosemary R. Kamer Enter new mailing address, if applicable: 4908 W Oakwood Dr., Apt B (Mailing address MAY BE A POST OFFICE BOX) McHenry, IL 60051-4973 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida __

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>	Address	Type of Action
Mgr	Sherwin P. Brown	1154 SW 4th Street Boca Raton, FL 33486-4512	
			□ Remove
			Change
			Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			Remove
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fective date, if other than the	March 10, 2		(optional)	
n effective date is listed, the date must ote: If the date inserted in this blo				
cument's effective date on the De				
record specifies a delayed The 90th day after the reco		an effective time, at	. 12:01 a.m. on the earli	ier of
	2010			
ated March 4	2019			
(Aleman	Charnon			
) werrary	Signature of h member or author	rized representative of a mem	ibei	
Rosemary R, Kamer				
in national processing		I name of signee		

Page 3 of 3

Filing Fee: \$25.00