

L16 000 172 079

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

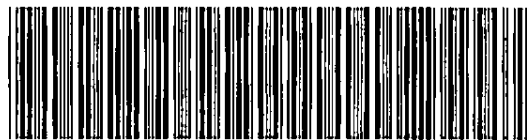
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600337458566

12/10/19--01010--007 \*\*35.00

DEPARTMENT OF STATE  
DIVISION OF CORPORATION  
TALLAHASSEE, FLORIDA

2020 FEB -3 PM 2:59

FILED

FEB 03 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 14, 2020

OSCAR J FUMAGALI  
OFRB, LLC  
15 ROYAL PALM WAY UNIT 107  
BOCA RATON, FL 33432

SUBJECT: BLANKA BAYS PROPERTY LLC  
Ref. Number: L17000172079

We have received your document for BLANKA BAYS PROPERTY LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 520A00001064

*PLEASE SEE ATTACHED.*

*JAN 25, 2020*

2020 FEB -3 PM 1:33

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: OFRB LLC  
Name of Limited Liability Company

REF# L17000172079

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

OSCAR FUMAGALI  
Name of Person

OFRB LLC  
Firm/Company

15 ROYAL PALM WAY UNIT #107  
Address

BOCA RATON, FL 33432  
City/State and Zip Code

FUMAGALI OSCAR @GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OSCAR FUMAGALI at (561) 441-1680  
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  
*ALREADY SUBMITTED*
- \$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 Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

OFRB LLC

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

2020 FEB - 3 PM 3:00  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
FILED

The Articles of Organization for this Limited Liability Company were filed on SEPT 14, 2020 and assigned  
Florida document number C16 000 172 079

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 "LLC."

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)

**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

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



