L17000012815

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 20, 2018

CHERYL GOLDSTEIN 919 S SOUTHLAKE DR HOLLYWOOD, FL 33019

SUBJECT: SOL SAVING OCEAN LIFE, LLC

Ref. Number: L17000012815

We have received your document for SOL SAVING OCEAN LIFE, 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 CORP, 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 $(850)\ 245-6051$.

Dionne M Scott Regulatory Specialist II

Letter Number: 318A00023801

2010 FOUR 2010:

COVER LETTER

SUBJECT: <u>564</u>	Savig Ocean Name of Lim	L; Fe		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Chery	1 Goldstein Name of Person		
	504	Saving Ocean L.	ife	_
	919 5	· Southlake Dr. Address		
	Hollywood,	FL 330/9 City/State and Zip Code		
	<u>Cheryl G</u> E-mail address: (insanctreative.c	ration)	
For further information c	concerning this matter, please ca	all:	,	D
Chery/	goldstain Afferson	at (<u>954</u>) <u>8/7</u> Area Code Daytime	74077 Telephone Number	
Enclosed is a check for t	he following amount: - a.	Tready submitted	d deposited (s	er letter
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)	å

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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**

Son our records.		and	assigned
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<u>re</u> :			
esignation "L1.C"	or the abl	breviation	"L.L.C."
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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 = Manager

AMBR = Authorized Member

Tit<u>l</u>e **Type of Action** <u>Name</u> <u>Address</u> 160 NE 3rd Ave. #700 DAdd Pt. Lauderdale, Fl 33301 Kremove ☐ Change _____ _ _ _ _ _ _ Add ☐ Remove ____ Change _□ Remove _____ Change □ Add ___ Remove _ Remove Change □ Add ☐ Remove

ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as			_		
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Page 3 of 3

Filing Fee: \$25.00