

**Florida Department of State**  
**Division of Corporations**  
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To:

Division of Corporations  
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Account Name : TAX HOUSE LLP  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**GUEST OCEAN LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

ARTICLES OF AMENDMENT 2020-08-14 19:10:40  
TO  
ARTICLES OF ORGANIZATION  
OF

GUEST OCEAN 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 03/09/2017 and assigned  
Florida document number L17000052460

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 "L.L.C."

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

City

Florida

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**



[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature of a member or authorized representative of a member

MANUEL R BARTOLETTI

Typed or printed name of signer