

L18000099819

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6393

From:

Account Name : TAXLEAF.COM INC
Account Number : 12014000084
Phone : (305) 541-3980
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
OAKTREE INVESTMENT GROUP LLC**

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JUN 25 2018

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

OAKTREE INVESTMENT GROUP 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 04/23/2018 and assigned
Florida document number L18000099819.

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 end with 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)

14334 BISCAYNE BLVD

NORTH MIAMI, FL 33181

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

14334 BISCAYNE BLVD

NORTH MIAMI, FL 33181

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:

ROMAR INTERNATIONAL LLC

New Registered Office Address:

14334 BISCAYNE BLVD

Enter Florida street address

NORTH MIAMI

Florida 33181

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 603, 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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BARBOZA, PAULO	536 NE 195 STREET	☐ Add
		NORTH MIAMI BEACH, FL 33179	☒ Remove
AMBR	BRITO DE SOUSA, THALLES	536 NE 195TH STREET	☐ Add
		NORTH MIAMI BEACH, FL 33179	☒ Remove
AMBR	BRITO DE SOUSA, THALLES	14334 BISCAYNE BLVD	☒ Add
		NORTH MIAMI, FL 33181	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated JUNE, 11TH 2018



Signature of a member or authorized representative of a member

THALLES BRITO DE SOUZA

Typed or printed name of signer

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