

L1800019183419

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LISETTE PIE SALAZAR PA
Account Number : I20120000076
Phone : (305)361-6161
Fax Number : (305)361-6168

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
OCEANA KB 1204-S, LLC**

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Corporate Filing Menu

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JUL 05 2018

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Oceana KB 1204-S, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Lisette Pie Salazar

Name of Person

Lisette Pie Salazar PA

Firm/Company

200 Crandon Blvd. #511

Address

Key Biscayne, FL 33149

City/State and Zip Code

lpsalazariaw@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisette Pie Salazar

305 361-6161
at ()

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

☐ \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Oceana KB 1204-S, 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 04/27/2018 and assigned
Florida document number L18000106419.

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)

360 Ocean Dr. #1204S

Key Biscayne, Fl. 33149

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

360 Ocean Dr. #1204S

Key Biscayne, Fl. 33149

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

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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>	<u>Address</u>	<u>Type of Action</u>
mgr	Lawrence C. Smith	360 Ocean Dr. #1204S	<input type="checkbox"/> Add
		Key Biscayne, Fl. 33149	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
mgr	Ann M. Smith	360 Ocean Dr. #1204S	<input type="checkbox"/> Add
		Key Biscayne, Fl. 33149	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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 TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
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850-617-6381

6/29/2018 1:05:11 PM PAGE 1/001

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June 29, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

OCEANA KB 1204-S, LLC
14 EAST 90TH ST. APT 12D
NEW YORK, NY 10128

SUBJECT: OCEANA KB 1204-S, LLC
REF: L18000106419

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please indicate type of action for Ann M. Smith.

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.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H18000191834
Letter Number: 518A00013576

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DIVISION OF CORPORATIONS
TALLAHASSEE, FL