

L 18 000 154260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

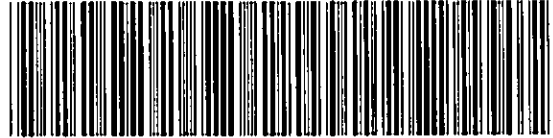
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700337305847

11/25/13--01024--002 **25.00

FILED
JAN 14 2023
DIVISION OF CORPORATION
19 NOV 25 AM 9:25

JAN 04 2023
C McNAIR

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: OCP DIGITAL TECH PARTNERS, LLC

Name of Limited Liability Company

RECEIVED
DIVISION OF CORPORATIONS
19 NOV 25 AM 9:25

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

Please return all correspondence concerning this matter to the following:

Pamela Poveda

Name of Person

OCP DIGITAL TECH PARTNERS, LLC

Firm/Company

600 Brickell Ave., Suite 1570

Address

Miami, FL 33131

City/State and Zip Code

pam@optimumcp.com

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

For further information concerning this matter, please call:

Josefina Eizayaga

305 537 0800
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

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

OCP DIGITAL TECH PARTNERS, LLC

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

RECEIVED
DIVISION OF CORPORATE AFFAIRS
19 NOV 25 AM 9:25

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned Florida document number _____.

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:

Optimum Advisors Inc.

New Registered Office Address:

600 Brickell Ave., Suite 1570

Enter Florida street address

Miami

City

Florida 33131

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

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	Leonardo Scatturice	600 Brickell Ave., Suite 1570, Miami, FL, 33131	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If 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 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

20 _____ 2019 _____

Signature of a member or authorized representative of a member

Gaston Marquevich, Manager

Typed or printed name of signer

**WRITTEN CONSENT OF THE MEMBER
OF**

OCP Digital Tech Partners, LLC, A LIMITED LIABILITY COMPANY

On this day, November 1, 2019, the undersigned, being the sole member of OCP Digital Tech Partners LLC, a Florida limited liability company (the "Company") acting by written consent without a meeting pursuant to Section 605.04073 of the Florida Revised Limited Liability Company Act, does hereby consent to the adoption of the following resolution:

WHEREAS, the sole member of this Company has purchased one hundred percent (100%) of the interests in this Company and has, therefore, become the sole member of the Company; and

WHEREAS, Optimum Capital Partners Inc. is the sole member of the Company and Gaston Marquevich, and Leonardo Scatturice shall act as Managers.

NOW THEREFORE LET IT BE:

RESOLVED, that the form, terms and provisions of the Operating Agreement of OCP Digital Tech Partners, LLC, dated July 12, 2018, including all exhibits and schedules attached thereto, attached as Exhibit A be, and hereby are, ratified and approved ;

RESOLVED, that as of the date hereof Gaston Marquevich and Leonardo Scatturice shall be appointed as Managers of the Company, to serve until their successors are duly elected and qualified. Mr. Marquevich and Mr. Scatturice sign herein below as sufficient proof of acceptance of his appointment;

RESOLVE, to remove Optimum Capital Partners Inc. as the agent and appoint Optimum Advisors Inc., as the new agent of the Company;

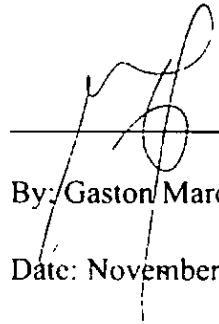
RESOLVED, to authorize Mr. Marquevich and/or whoever he authorizes to file the necessary forms and to do all such acts, deeds and things as may be necessary to give effect to these resolutions ;

RESOLVED, that all the acts taken above, and all the resolutions are approved ratified and adopted.

[Signature page follows]

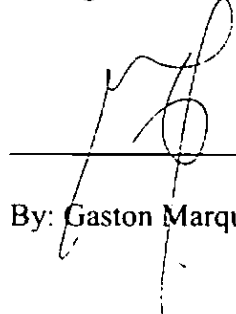
IN WITNESS WHEREOF, the undersigned Members have executed this written consent.

MEMBER: OPTIMUM CAPITAL PARTNERS INC.



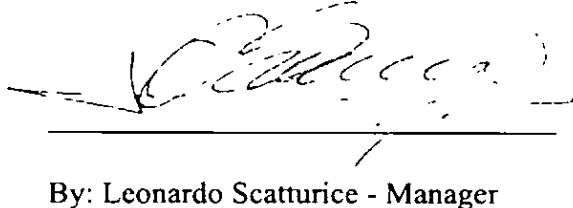
By: Gaston Markevich, its President
Date: November 1st, 2019

Mr. Gaston Markevich, being interested in this business, hereby accepts his appointment as Manager of the Company.



By: Gaston Markevich – Manager

Mr. Leonardo Scatturice, being interested in this business, hereby accepts his appointment as Manager of the Company.



By: Leonardo Scatturice - Manager