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(Re	questor's Name)	
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COVER LETTER

Div	ision of Corp	oorations		
SURTECT:	OCEAN BL	UEC APARTMENTS LLC		
SOBJECT.		Name of Limi	ited Liability Company	
The enclosed	I Articles of A	Amendment and fee(s) are subi	mitted for filing.	
Please return	all correspor	idence concerning this matter t	to the following:	
		W HENRY OCONNELL		
			Name of Person	
W H OCONNELL, & ASSOCIATES PA				
Firm/Company				
2825 LEWIS SPEEDWAY SUITE 104				
			Address	
		ST AUGUSTINE FL 3208	4	
			City/State and Zip Code	
		HENRY@WHOCPA.COM		
		E-mail address: (t	to be used for future annual report notif	ication)
For further in	nformation co	ncerning this matter, please ca	all:	
W HENRY	OCONNELL		904 829-0082 at ()	
	Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling 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

TO:

Registration Section

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

(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 OCTOBER 16 2018 Florida document number 1.18000243507	
1 18000243507	
Florida document number L18000243507	
Florida document number 118000243507	T
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here;	
OCEAN BLUE APARTMENTS LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.1C."	
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	e new
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Address. Enter Florida street address	

, Florida	

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			☐ Change
			Add
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If amending any other info		, 		
				
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Effective date, if other than the active date is listed, the da Note: If the date inserted in a document's effective date on	his block does not meet the :	applicable statutory:	(options or more than 90 days after fili filing requirements, this da	il) ng.) Pursuant to 605.0207 ite will not be listed as
he record specifies a de The 90th day after the	ayed effective date, be record is filed.	ut not an effectiv	ve time, at 12:01 a.n	n. on the earlier of
Dated OCTOBER 23	2618			
Miley?	Signature of a number of	or authorized represent	nive of a member	
A HAMPION IS ABOUT	·			
MICKEY D STRO		r printed name of Signi		

Page 3 of 3

Filing Fee: \$25.00