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LAVISION OF CONFORATIONS

LLC Amend. 8-1-19 DC

COVER LETTER

TO:	Registration Sec Division of Corp					
	OC LIFEST	YLE, LLC				
SUBJECT: Name of Limited Liability Company						
The e	enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Pleas	e return all correspor	ndence concerning this matter	to the following:			
		BRITTNEY WILSON				
		OC LIFESTYLE, LLC	Name of Person			
		4250 ALAFAYA TRL SUI	Firm/Company TE 212-238			
		Oviedo, FL 32105	. Address			
		Brittney@oclifestyle.com	City/State and Zip Code			
		E-mail address: (to be used for future annual report notif	ication)		
For fu	urther information co	oncerning this matter, please ca	all:			
BRIT	TTNEY WILSON		407 618-4332 at ()	Telephone Number		
	Name of	Person	Area Code Daytime	Telephone Number		
Enclo	osed is a check for the	e 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

OC LIFESTYLE, 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 ______ 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: 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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MOD	BRITTNEY WILSON	4250 ALAFAYA TRL	
MGR		SUITE 212-238	Add
		OVIEDO FL 32765	Add
			□ Remove
			□ Change
			□ Add
			□ Remove
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			Li Change
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E. Effective date, if other than the date of filing: (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) 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.
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.
Dated 07/31/9019
Signature of a member or authorized representative of a member
Exitive WISW1 Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00