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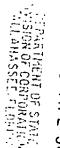
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COVER LETTER

Division of Cor				
SUBJECT:		LAGIA LLC ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	MINAS HALL	LIAS & ATLATER Name of Person	INI SISJANI	
	OSIA	PELAGIA LLC Firm/Company		
	2815, Waterf	and Drive North		
		Doerfield Beach City/State and Zip Code	-Franda 33442	
	SISSUNI (E-mail address: (t	ous Og Mail. CM to be used for future annual report noti	fication)	
For further information co	oncerning this matter, please ca	di:		
Kate Sissani at (415) 6915909 Name of Person Area Code Daytime Telephone N		5909_ e Telephone Number		
Enclosed is a check for th	e following amount:			
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration S		Street Address: Registration Se	ction	
Division of C P.O. Box 632	orporations		Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2

=:

OXIA DE,	AGIA LLC
(Name of the Limited Liability	y Company as it now appears on our records.) Limited Liability Company)
	[[[[[]]]]] [[] [] [] [] [
The Articles of Organization for this Limited Liability Co	ompany were filed on 09-03-2019 and assigned
Florida document number <u>L19000223298</u>	3. Special 55
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and contain the words "Limit	ted 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 ADDR.	ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
(Manual and the IMIT BUTTI OUT OF TICE BOTT	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

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>	Name.	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□ Add
		-	Remove
			□ Change
	······································		□Add
			□Remove
		 	Change
			□Add
			DRemove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□ Change

Page 2 of 3
2. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
In the event that one of the managers deceases the
assets and leabilities of the company of OSIA
PELAGIA LC will transfer 100% to the other
_Manappr.
(Please provide us a copy of that change)
E. Effective date, if other than the date of filing: 0 22 2020 (optional) (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)(to 1)
<u>Note:</u> 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.
f 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 01/22/2020, Florida 4 Austeriu Sissari & Minas Halkias Signature of a member or authorized representative of a member
A KATERINI SISSANI & MINAS HALKIAS Typed or printed name of signee

Page 3 of 3