

2021-08-19 14:59

L19000237838

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H210003110603)))



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

From:  
Account Name : JONES FOSTER P.A.  
Account Number : 076077003231  
Phone : (561)650-0471  
Fax Number : (561)650-5300

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

Email Address: jfservice@jonesfooster.com

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
4 OCEAN LANE LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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A. LUNT

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Help



August 19, 2021

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

4 OCEAN LANE LLC  
222 LAKEVIEW AVE, STE 1500  
WEST PALM BEACH, FL 33401

SUBJECT: 4 OCEAN LANE LLC  
REF: L19000237838

*I have re-faxed the  
documents using a  
different fax machine.  
Thanks. Sherry*

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

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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) 245-6050.

Valerie Herring  
Regulatory Specialist III

FAX Aud. #: H21000311060  
Letter Number: 021A00019895

J O N E S  
F O S T E R

August 18, 2021

Division of Corporation  
Florida Department of StateRe: Articles of Amendment for 4 Ocean Lane LLC changing name to Combinat, LLC  
Fax Audit Number H21000311060 3Articles of Amendment for 711 North County Road LLC changing name to 4 Ocean Lane, LLC  
Fax Audit Number H21000311069 3

To Whom It May Concern:

Please be advised that Elizabeth Ailes is the manager and member of both of the above limited liability companies and desires to change their names as described above. Elizabeth Ailes as Manager of Combinat, LLC, f/k/a 4 Ocean Lane LLC, approves the use of the name "4 Ocean Lane, LLC" by 711 North County Road LLC. Therefore, I enclose the following:

1. Fax Audit Number H21000311060 3 cover and Amendment to Articles of Organization of 4 Ocean Lane LLC, changing its name to Combinat, LLC.
2. Fax Audit Number H21000311069 3 cover and Amendment to Articles of Organization of 711 North County Road LLC, changing its name to 4 Ocean Lane, LLC.
3. Letter signed by Elizabeth Ailes as manager of Combinat, LLC, f/k/a 4 Ocean Lane LLC, approving the name change of 711 North County Road LLC to 4 Ocean Lane, LLC.

Firstly, please file the 4 Ocean Lane LLC name change amendment (to Combinat, LLC), and then file the 711 North Ocean Road LLC name change amendment and fax the certifications to me at 561-650-5300. Please contact me should you have any questions or need more information. Thank you.

Sincerely,

JONES FOSTER P.A.

By   
Sherry Wadsworth

Special Assistant Corporate Matters

Enclosures

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swadsworth@  
jonesfoster.com561-650-0471 T  
561-650-5300 F505 S. Flagler Drive  
Suite 1100West Palm Beach  
Florida 33401E S T .  
1 9 2 4

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

H21000311060 3

4 OCEAN LANE 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 09/20/2019 and assigned  
Florida document number L19000237838

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

COMBINAT, LLC

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:

6 OCEAN LANE

(Principal office address **MUST BE A STREET ADDRESS**)

PALM BEACH, FL 33480

Enter new mailing address, if applicable:

6 OCEAN LANE

(Mailing address **MAY BE A POST OFFICE BOX**)

PALM BEACH, FL 33480

**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:

JONES FOSTER SERVICE, LLC

New Registered Office Address:

505 SOUTH FLAGLER DRIVE, SUITE 1100

Enter Florida street address

WEST PALM BEACH

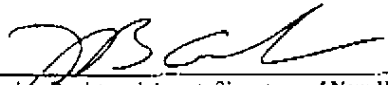
Florida 33401

City

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	MAURA ZISKA	222 LAKEVIEW AVE, STE 1500	<input type="checkbox"/> Add
		WEST PALM BEACH, FL 33401	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ELIZABETH AILES	6 OCEAN LANE	<input checked="" type="checkbox"/> Add
		PALM BEACH, FL 33480	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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2021-08-19 15:00

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

[illegible]

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2021 AUG 19 AM 10:17

E. Effective date, if other than the date of filing: \_\_\_\_\_ (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)(b)

**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 AUGUST 17, 2021

Elizabeth Jiles  
Signature of a member or authorized representative of a member

ELIZABETH AILES, MANAGER

Typed or printed name of signee

**Filing Fee: \$25.00**

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