Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PADRON AND ASSOCIATES INC.

Account Number : I20060000156

Phone : (305)818-0404

Fax Number : (305)818-0898

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

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN Serial **OLBE GROUP LLC**

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

Help

Registration Section

Tallahassee, FL 32314

TO:

COVER LETTER

Division of Con	porations			
OLBE GR				
Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	EDUARDO E. DIEPPA III			
	Name of Person			
	DIEPPA LAW FIRM P.A.			
	Firm/Company			
	10689 N KENDALL DR #	‡314		
	Address			
	MIAMI FL 33176			
	**	City/State and Zip Code	······································	
	EDIEPPA@DIEPPALAW.			
		to be used for future annual report no	tification)	
For further information of	concerning this matter, please c	all:		
EDUARDO E. DIEPPA III		305 279-1782		
Name of Person		Area Code Dayu	me Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	© \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Ell \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OLBE GROUP LLC		
(Name of the Limited Liab (A Flor	ility Company as it now appears on our reida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Florida document number 120000091631	Company were filed on 3-27-2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited 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 ADI	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7020 II. Y - 5
B. If amending the registered agent and/or register agent and/or the new registered office address here		nter the name of the new registered
Name of New Registered Agent:		<u>ि जि</u>
New Registered Office Address:	Enter Florida street a	nddress
		_, Florida
	City	Zip Coste

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 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
MGR	SARA OLBE	14221 SW 88 ST # 106C	
		MIAMI FL 33186	≣Remove
			⊟Change
			
		□Remove	
		□Change	
			□Add
			□Remove
		© Change	
		DAdd	
	······································	☐Reraove	
			□Change
		CRemove	
			- Change
			CAdd
			□Remove
			T Channe

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Typed or printed name of signee