

L20000 210 053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

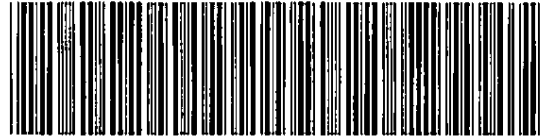
(Business Entity Name)

(Document Number)

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NOV 05 2020  
S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ONE OF ONE MIAMI LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEVAUGHN CHRISTOPHER

\_\_\_\_\_  
Name of Person

ONE OF ONE MIAMI LLC

\_\_\_\_\_  
Firm/Company

2933 SW 174TH AVE

\_\_\_\_\_  
Address

MIRAMAR, FLORIDA 33029

\_\_\_\_\_  
City/State and Zip Code

VAUGHNSLIFESTYLE@GMAIL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEVAUGHN CHRISTOPHER

786 359-2621  
at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

ONE OF ONE MIAMI 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 JULY 20, 2020 and assigned Florida document number L20000210053.

This amendment is submitted to amend the following:

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

PLAYE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

2933 SW 174TH AVE

(Principal office address MUST BE A STREET ADDRESS)

MIRAMAR, FLORIDA 33029

Enter new mailing address, if applicable:

2933 SW 174TH AVE

(Mailing address MAY BE A POST OFFICE BOX)

MIRAMAR, FLORIDA 33029

**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

*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

2

**AMBR = Authorized Member**

[illegible]

*[The page contains faint horizontal lines, suggesting it was part of a lined notebook or document.]*

(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.

Dated September 22nd, 2020

\_\_\_\_\_

Typed or printed name of signee