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11/08/21--81031--014 **39.00



COVER LETTER

Registration Section Division of Corporations

TO:

OZZIE INV	VESTMENTS LLC	•	
SOBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Osvaldo Romay JR		
		Name of Person	
	OZZIE INVESTMENTS I	.LC	
		Firm/Company	
	12440 Lantana Ave		
		Address	
	New Port Richey, FI 3465-	4	
		City/State and Zip Code	
	Romeyjr95@gmail.com		
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	all:	
Osvaldo Romay JR		at () 534-2571 Area Code Daytime	
Name of Person		Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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 Address Registration 3 Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	oorations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

OZZIE INVESTMENTS LLC

2021 NOV -8 PH 2: 10

(Name of the Limited Liability Compa (A Florida Limited I	nv as it now appears on our reconstability Company)	TO THE STATE	
The Articles of Organization for this Limited Liability Company			
Florida document number 86-2716523 12100009116	5		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L	LC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	12440 Lantana Ave New Po	rt Richey, FL 34654	
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	12440 Lantana Ave New Po	rt Richey, FL 34654	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, <u>ent</u>	er the name of the new registered	
New Registered Office Address:	Enter Florida street add	ress	
	City	FloridaZip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 60.	and I am familiar with and 5, F.S. Or, if this document is	
If Chan	ging Registered Agent, Signatur	e 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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Osvaldo Romay Jr	12440 Lantana Ave New Port Richey Fl 34654	□Add
			□Remove
			🗃 Change
MGR	Karla Romay	12440 Lantana Ave New Port Richey Fl 34654	□Add
			□Remove
			□Add
			Remove
			□Change
			□Add
			Remove
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m effecti <u>ote:</u> H	ive date is lisu the date inse	her than the ed, the date mus rted in this bl date on the D	a be specific a ock does not	nd cannot be pr . meet the app	ior to date of licable statu	filing or more to	(opti han 90 days after quirements, thi	onal) filing.) Pursuant (s date will not b	o 605,0207 e listed as
ecord s		layed effectiv	e date, but n	ot an effective	e time, at 12	:01 a.m. on tl	ne earlier of: (b) The 90th day	after the
ited	/4			2021					
			M	a	Ro	ma	1		_
			Signature of	a ihenber or at	unorized repi	resentative of a	member		

Filing Fee: \$25.00