

8/02/2021 9:29:4
8/2/2021

From: 3058517588 Meland Budwick
Division of Corporations

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L210000166624
Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : MELAND RUSSIN & BUDWICK, P.A.
Account Number : I20040000113
Phone : (305)358-6363
Fax Number : (305)358-1221

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

Email Address: CRAMOS@MELANDBUDWICK.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
OCEAN OFFICE PARTNERS, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$30.00

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DIVISION OF STATE
TALLAHASSEE, FLORIDA

2021 AUG -2 PM 4:58

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8/3/21
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OCEAN OFFICE PARTNERS, 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 APR 11, 9, 2021 and assigned
Florida document number L21000166624.

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

2200 N. OCEAN BLVD., #CU2

FORT LAUDERDALE, FL 33305

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2200 N. OCEAN BLVD., #CU2

FORT LAUDERDALE, FL 33305

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:

JEFFREY M. OSINSKY P.A.

New Registered Office Address:

2200 N. OCEAN BLVD., #CU2

Enter Florida street address

FORT LAUDERDALE

Florida 33305

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	YORAM SHEMESH	200 S. BISCAYNE BLVD., SUITE 3200	<input type="checkbox"/> Add
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MATTHEW KARCH	2200 N. OCEAN BLVD., #CU2	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FL 33305	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ANDREY IONES	2200 N. OCEAN BLVD., #CU2	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FL 33305	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

SECURITY
TALLAHASSEE
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7:4:58

E. Effective date, if other than the date of filing: _____ (optional)

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 July 22, 21

Signature of a member or authorized representative of a member

MATTHEW KARCH
Typed or printed name of signer

Typed or printed name of signer