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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (855)330-1010

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 OCEAN INVESTMENT PROPERTIES LLC

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2021, AUG 20 PTH 12:

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

. \$

Ocean Investment Prope		
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	and assigned	
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicab		2021 1541
Principal office address MUST BE A STREET.	ADDRESS)	AUG 21
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	<u> </u>
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office address on our records, <u>enter th</u> <u>here</u> :	e name of the new registered
Name of New Registered Agent:	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	
New Registered Office Address:	Enter Florida street address	
	, Flori	ida
	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 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>	Address	Type of Action
AMBR	Marti Garro Holdings, LLC	7901 4th St N STE 300	% Add
		St. Petersburg, FL 33702	□Remove
			□Change
AMBR	Brendan Langley	7901 4th St N STE 300	□ Adđ
		St. Petersburg, FL 33702	&Remove
			🗆 Add
			□Remove
			Change
			□Add
			Remove
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			□Change

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E. Effective date, if other the (If an effective date is listed, the one Note: If the date inserted in document's effective date of	this block does not n	neet the applicable	late of filing or more than e statutory filing requi	(optional) 190 days after filing, rements, this date) Pursuant to 605.0207 (3)(will not be listed as the
If the record specifies a delayed record is filed.	effective date, but not	an effective time	at 12:01 a.m. on the	earlier of: (b) Th	e 90th day after the
Dated 8/20		2021			
Morgan (Signature of a	member or authoriz	ed representative of a m	ember	
Morgan					
iviorgan	INODIC	Typed or printed i	name of signee		·

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