## 121000215206

(Requestor's Name)
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SECRETARY OF STARR

2021 AUG 27 AM 12: 35

## **COVER LETTER**

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Ryan Tables, Esq.		
		Name of Person	<del></del>
	Tables Law Group, P.A.		
		Firm/Company	
	3475 Sheridan Street, Suite	: 301	
		Address	
	Hollywood, Florida 33021		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	tableslawgroup.patty@gma		
	E-mail address: (	to be used for future annual report noti-	fication)
For further information c	oncerning this matter, please ca	all:	
Patricia Martinez		305 510-6870	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne 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		Street Address:	ation

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Section

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

FILED

LTB OCEAN MAIA, LLC

2021 AUG 27 AM 12: 39

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE

The Articles of Organization for this Limited Liabil	lity Company were filed o	n 05/07/2021	and assigned
Florida document number 1.21000215206			
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability compar	iy here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company."	the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	(IDDRESS)		
Mailing address MAY BE A POST OFFICE BO.  B. If amending the registered agent and/or registagent and/or the new registered office address have a post of New Registered Agent:	stered office address on o		
New Registered Office Address:	Ente	r Florida street address	
		, Flori	ida Zip Code
_	City		Zip Code
New Registered Agent's Signature, if changing Regi	istered Agent:		
I hereby accept the appointment as registered as provisions of all statutes relative to the proper accept the obligations of my position as register being filed to merely reflect a change in the region company has been notified in writing of this change.	and complete performand red agent as provided for istered office address, 14	ve of my duties, and in Chapter 605, F.	I am familiar with and S. Or, if this document is

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
MBR	Boris Lopez	5671 SOUTHWEST 99TH AVE	□ Add
		Miami, FL 33173	■Remove
			□Change
			□ Add
			□Remove
		<del></del>	□Change
			□Add
			Remove
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			□ Add
		- <del></del>	□Remove
			□ Change

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		<del></del>
. Effective date, if other than t (If an effective date is listed, the date r Note: If the date inserted in this document's effective date on the	ist be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuan block does not meet the applicable statutory filing requirements, this date will not	t to 605.0207 (3 \(\)be listed as the
the record specifies a delayed effectord is filed.	ve date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th date.	ay after the
	2021	
August 23 Dated	·	
Dated August 23		