## L21000516538

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
_	
	(Duran W. Carry, No. 1977)
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
<u> </u>	<del>.</del>
Special Instructions t	o Filing Officer:
L	

Office Use Only



400382794244

022 MAR - 4 AM 8: 32

R-4 PH 3:47 (->

MAR 0.7 ZUZZ I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 5

7103152

AUTHORIZATION

COST LIMIT : \$ 25.00

-----

ORDER DATE: March 4, 2022

ORDER TIME : 11:41 AM

ORDER NO. : 528240-010

CUSTOMER NO: 7103152

\_\_\_\_\_\_

## DOMESTIC AMENDMENT FILING

NAME: OBP MERIDIAN, LLC

EFFECTIVE DATE:

XXX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY

\_\_ PLAIN STAMPED COPY
\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OBP Meridian, LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on December 7, 2021	and assigned
Florida document number L21000516538		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
OBP Conroe, LLC		
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2_
(Principal office address MUST BE A STREET ADDRESS)		022
		F.F. A
		32 1 F
Enter new mailing address, if applicable:		SSC
(Mailing address MAY BE A POST OFFICE BOX)		mn x
,		<u> </u>
		(1) N
B. If amending the registered agent and/or registered office	address on our records, enter the r	name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
Name of New Registered Agent.		·
New Registered Office Address:	Enter Florida street address	
	Emer v ioriaa sireet aaaress	
<del></del>	, Florida	Zip Code
Non-Books and Accord States and States and Books and Accord	•	zip Code
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	e performance of my duties, and I a provided for in Chapter 605, F.S.	im familiar with and Or, if this document is

If Changing Registered Agent, Signature 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					
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			□Add		
			□Remove		
			☐ Change		
			□Add		
			□Remove		
			Change		
<del></del>		<del></del>	□Add		
		<del></del>	□Remove		
			□Change		
			□Add		
			Remove		
			□Change		
			□Add		
			□Remove		
<del></del>		<del></del>	□Add		
			□Remove		
			□Change		

		_
<del></del>		
		_
<del></del>		_
		_
		<del></del>
		_
		_
		_
		_
<del></del>		-
		_
	······································	-
		_
		-
Effective date, if other than th	ne date of filing: (optional)	
If an effective date is listed, the date mo Note: If the date inserted in this h	oust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 block does not meet the applicable statutory filing requirements, this date will not be lis	)5.0207 sted as
document's effective date on the I	Department of State's records.	icu as
e record specifies a delayed effecti	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft	er the
rd is filed.		
March 4 Dated	2022	
	The state of the s	
<del></del>	Signature of a member or authorized representative of a member	
Matthau I Clarkinalei	Fig. Authorized Dan of a Mambar	
WIAHINEW L. OTABIRSKI,	, Esq., Authorized Rep. of a Member  Typed or printed name of signee	
	i ypeu or primeu name or signee	

Filing Fee: \$25.00