h22000160963

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(4.5) 5.6(6.2) [6.1]
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S. PRATHER

COVER LETTER

	Registration Division of	n Section Corporations	
SUBJEC		2 NW 2 AVENUE LLC	
SUBJEC	-1. <u> </u>	Name of Limited Liability Company	
The encl	osed Articles	s of Amendment and fec(s) are submitted for filing.	
Please re	turn all corre	espondence concerning this matter to the following:	
		DOGA MERIC	
		Name of Person	
		OZ-302 NW 2 AVENUE LLC	
		Firm/Company	
		3075 N.W. SOUTH RIVER DRIVE	
		Address	
		MIAMI, FL 33142	
		City/State and Zip Code	
		doga.meric@beai.com	
		E-mail address: (to be used for future annual report notification)	
For furth	er informatio	on concerning this matter, please call:	
DOGA N	MERIC	305 461-2053 x 115	
	Nar	me of Person Area Code Daytime Telephone Number	
Enclosed	l is a check fo	or the following amount:	
₩\$25.	00 Filing Fee	c S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enc	

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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OZ-302 NW 2 AVENUE LLC		
(Name of the Limited Lia	bility Company as it now appears on our records.) rida Limited Liability Company)	ZZ JUL 14
(A Fig	rida Elimited Elability Company)	(T) (T)
The Articles of Organization for this Limited Liability	y Company were filed on 04/15/2022	and assigned
Florida document number L22000160963	·	6: 12 Tara Orida
This amendment is submitted to amend the following	;	
A. If amending name, <u>enter the new name of the l</u>	imited liability company here:	
OZ-GNV-302 NW 2 Avenue LLC		
The new name must be distinguishable and contain the words "l	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 AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
mutang tuturess MAT DE A TOST OFFICE DOA		
	-	
B. If amending the registered agent and/or registe	ered office address on our records, enter the na	me of the new registered
agent and/or the new registered office address her		
Name of New Registered Agent:		
New Registered Office Address:		
- · · - · · · · · · · · · · · · · · · ·	Enter Florida street address	
	, Florida	
-	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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			Change
			🗆 Add
			Remove
			□Change

		
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Note: If the date inserted i	than the date of filing:	ptional) fter filing.) Pursuant to 605.0207 (this date will not be listed as t
e record specifies a delayed d is filed.	d effective date, but not an effective time, at 12:01 a.m. on the earlier of:	(b) The 90th day after the
d is filed.	d effective date, but not an effective time, at 12:01 a.m. on the earlier of:	(b) The 90th day after the
rd is filed.	2022	77
rd is filed. Dated		TALL HASS