

L22 000 232563

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(City/State/Zip/Phone #)

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RECEIVED  
DIVISION OF REVENUE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ODBH INVESTMENTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Noa Hen

Name of Person

Dedicated CPA

Firm/Company

7520 NW 5th ST STE 103

Address

Plantation, FL 33317

City/State and Zip Code

noa@dedicatedcpa.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Noa Hen

305

423-9993

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

ODBH INVESTMENTS 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 05/18/2022 and assigned Florida document number L22000232563.

This amendment is submitted to amend the following:

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

N/A

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)

4335 21st Place

Vero Beach, FL 32966

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

4335 21st Place

Vero Beach, FL 32966

**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:

Matan Ben Ami

New Registered Office Address:

4335 21st Place

*Enter Florida street address*

Vero Beach

*City*

Florida 32966

*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

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	Or Duev	805 N Olive AVE APT 402	<input type="checkbox"/> Add
		West Palm Beach, FL 33401	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MBA Consulting USA INC	4335 21st Place	<input checked="" type="checkbox"/> Add
		Vero Beach, FL 32966	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ODC Consulting INC	7520 NW 5th ST STE 103	<input checked="" type="checkbox"/> Add
		Plantation, FL 33317	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	OBA Management LLC	3960 Farmer Way APT 302	<input checked="" type="checkbox"/> Add
		Lutz, FL 33559	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	C.H.V Consulting LLC	2570 NE 201st Street	<input checked="" type="checkbox"/> Add
		Miami, FL 33180	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 Division of Corporation  
 State of Florida

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

N/A

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DIVISION OF CONSPIRACY

**E. 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 September 1st, 2022

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Or Duev

  
\_\_\_\_\_  
Typed or printed name of signee