## L23000192962

(Requ	estor's Name)	
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☐ bICK·∩b	WAIT	MAIL
(Busin	ess Entity Name	)
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Certified Copies	Certificates of	Status
Special Instructions to Filin	ng Officer:	

Office Use Only



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S. ROBERTS AUG 0 1 2023

`FLORIDA CAPITAL COURIER SERVICES, II	NC
2330 CLARE DRIVE	
TALLAHASSEE, FL 32309	
(850) 524–5437	
(850) 524–6243	
Please use funds from this account:	120210000160: \$25.00
Authorization Signature:	<del>-                                      </del>
Healed by the Ocean LLC L230001929	962
BUSINESS NAME	DOCUMENT #
Certified Copy	
Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Corp	_XAmendment
Not for Profit Limited Liability	Resignation of R.A. Officer/Director Change of Registered Agent
Domestication	Revocation of Dissolution
Other	Merger
CORP	Articles of Conversion
LLLP	Amended and restated Articles Statement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing
Cancelation of Fictitious Name	Qualification for LLP  Reinstatement
APOSTILLE	Other
Country	
EXAMINER'S INITIALS:	

## **COVER LETTER**

TO:

Registration Section

Division of C	orporations		
	BY THE OCEAN LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	JAY NAGY		
		Name of Person	
	HEALED BY THE OCEA	AN LLC	
		Firm/Company	
	2100 PGA BLVD #522		
		Address	-
	PALM BEACH GARDEN	8S, FL, 33408	
		City/State and Zip Code	<del></del>
	NAGYPRESS@GMAIL.C	OM to be used for future annual report not	tication)
For further information	concerning this matter, please c	•	
JAY NAGY		561 5169399	
Name	of Person	at () Area Code Daytin	ne 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)
<u>Mailing Addr</u> Registration		Street Address: Registration Se	ection
Division of	Corporations	Division of Co	rporations
P.O. Box 63 Tallahassee		The Centre of 2415 N. Monro	Tallahassec be Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HEALED BY THE OCEAN LLC	
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on 04/19  Florida document number 1.23000192962	9/2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here	
The new name must be distinguishable and contain the words "Limited Liability Company," the desi	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	*3 *
The state of the letter by a compared to be been	
	·-
	<b>:</b>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered office address on our recagent and/or the new registered office address here:	ords, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:  Enter Florida	a 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 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
MGR	JAY NAGY	2100 PGA BLVD #522 PALM BEACH GARDE	NS FI, ■Add
			□Remove
			□Change
		<del></del>	□Add
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· · · · · · · · · · · · · · · · · · ·			□Add
			□Remove
			Change

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Filing Fee: \$25.00