123000228423

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



700417635367

10/20/23--01019--004 **30.00

2023 CCT 2.0 FH 8: 17



COVER LETTER

TO: Registration So Division of Cor			
subject: <u>53(8</u>	Oceanshore U.C.	. ·	•
SUBJECT: JAVA	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
	Elmar Locker	Name of Person	
	5368 Oceansi	ACICL Firm/Company	
	5368 N Occo	Shoce Bluck	
	Palm Coast F	City/State and Zip Code	
	Oceanshare ve ntuce	o be used for inture annual report notif	fication)
For further information e	concerning this matter, please ca	II:	
Carolyn Hath	1 <u>S</u> f Person	at (<u>Rlo</u>) <u>SloU-281</u> Area Code Daytime	C Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	Sign \$30.00 Fifing 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		Street Address: Registration Sec	ction
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of T	allahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Florida	ty Company as it now appears on our a Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability C	Company were tiled on 5/09/	23 and assigned
Florida document number <u>L23CXX27</u> 8423	_ _ ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		202.
	DL'CC)	, , , , , , , , , , , , , , , , , , ,
Principal office address MUST BE A STREET ADDI	RESS)	:0
		P :
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records	s, enter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida stre	et address
		, Florida Zip Code
	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>	<u>Name</u>	<u>Address</u>	Type of Action
HGR	Carolyn Hathis	1580 Lambert Ave	& [Add
		1580 Lambert Ave Flagler Brach, FL 32136	□Remove
			□Change
			□Add
			[Remove
			□ Change
			□Add
			🗀 Remove
			Change
			□ A dd
			□Remove
			[Change
			□Add
			□Remove
			□ Change
			🗆 🗖 🗖 dd
			□Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets. if necessary.) 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. Signature of a member or authorized representative of a member Elmer Loiliar
Typed or printed name of signee