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Division of Corporators

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MELAND RUSSIN & BUDWICK, P.A.

Account Number : I20040000113

: (305)358-6363 Phone Fax Number : (305)358-1221

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: CRAMOS@MELANDBUDWICK COM

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89/86/2823 88:31 From: 3858517588 Meland Budwick Page: 2/5

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Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OVP Miami, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Clability Company)	<del> </del>		
The Articles of Organization for this Limited Liability Company Florida document number 1.23000326839	and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbre	oviation "L.L.C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	29		
Enter new mailing address, if applicable:		393		
(Mailing address MAY BE A POST OFFICE BOX)		ຸ່ງ		
		<u> </u>		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, enter the name o	of the new registered  2		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
<u>-</u>	, Florida			
	, Florida	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am fan provided for in Chapter 605, F.S. Or, if	uliar with and 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>	Name	Address	Type of Action
MGR	Cassidy Tonjum	200 S. Biscayne Blvd., Suite 3200	[]Add
		Miami, FL 33131	
			[]Change
MGR	Melissa Tonjum	200 S. Biscayne Blvd., Suite 3200	
		Miami, FL 33131	■Remove
			TChange
	<del></del>		□Add
			□Remove
		<del></del>	DChange
			∐Add
			ERemove
			Change
			□Change
			CIRemove
			[ Change

***************************************	
•	
. Effective date, if other than the date of fili	ing: (optional)
(If an effective date is listed, the date must be specific at Note: If the date inserted in this block does not document's effective date on the Department of	ing: (uptional) and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) is meet the applicable statutory filing requirements, this date will not be listed as the f State's records.
the record specifies a delayed effective date, but no cord is filed.	not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated August 31	, 2023
Dated	_ · · ·
Marken	
The state of a	a member or authorized representative of a member
Petter Tonjum	
rotter roulatii	

Filing Fee: \$25.00

Typed or printed name of signee