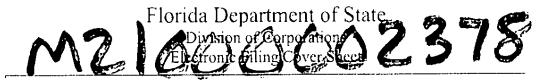
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Division of Corporations



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(((H22000256037 3)))



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From:

Account Name : CUEVAS, GARCIA & TORRES, P.A.

Account Number : 120030000123 Phone : (305)461-9500 : (786)362-7127 Fax Number

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

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JUL 2 9 2022

H22000256037 3

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear State: ONX-ODAGLED GRAND PALMS, LLC		parment of		
Enter new principal office address, if applicable:	3200 FARHART			
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	CARROLLTON, TX 75006			
Enter new mailing address, if applicable:	3200 EARHART		.	
(Mailing address MAY BE A POST OFFICE BOX)	CARROLLTON, TX 75006		2022 JUL 29	
2. The Florida document number of this limited li	ability company is: M2100000233	18 SSENY OF	FILED	
3. Jurisdiction of its organization: Delaware				
4. Date authorized to do business in Florida: $\frac{03/6}{1}$	01/2021	<u>=</u> _=	53	
5. New name of the limited liability company:	d for the purpose of transacting by	usiness in Florida and	attach a	
must contain "Limited Liability Company," "L.L. 6. If amending the registered agent and/or register registered agent and/or the new registered office a Name of New Registered Agent:	red officer address on our records address here:		new	
New Registered Office Address:	Enter Florida	Street Address		
	, Florida			
_	City	, Florida Zip Co	de	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered age the provisions of all statutes relative to the prope and accept the obligations of my position as regis document is being filed to merely reflect a change liability company has been notified in writing of the state of t	ent and agree to act in this capact r and complete performance of m stered agent as provided for in Ch e in the registered office address.	y duties, and Lam Jam apter 605, F.S. Or, if	iliar with this	
<u> </u>	Changing Registered Agent, Sign	ature of New Register	ed Agent	

H22000256037 3

8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:						
Fitle/ Capacity	Name	<u>Address</u>	Type of Action			
AP	CASTRO, ALEJANDRO		□Add			
			■Reino			
M	ONX, INC	3200 EARHART	= Add			
		CARROLLTON, TX 75006	□Remo			
			□Add			
			□Remo			
			□Add			
			□Remo			
			□Add			
aforementio	a certificate, if required: no more the ned amendment(s), duly authentical under the law of which this entity is	ited by the official having custody of records in t	Remo			

Filing Fee: \$25.00