M24000015014

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32304 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date:	02/27/2025	
Name:	Ovidshel Occean Jr.	
Reference	#:2665610	
	e:1133 BAIS	DEN RD LLC
	cles of Incorporation/Authorization to	
√ Ame	endment	
☐ Cha	nge of Agent	
☐ Rein	nstatement	
Con	version	
☐ Mer	ger	
☐ Diss	olution/Withdrawal	
☐ Ficti	tious Name	
Othe	er	
Authorized		
Signature:	O. Bush Jus	

F: +852.2682.9790



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Authorized		
Signature:	O. Quen Jus	

F: +852.2682.9790

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 app	ears on the records of the Florida Department of				
State: OSI	OSI 1133 BAISDEN RD LLC				
Enter new principal office address, if applicable					
(Principal office address MUST BE A STREET ADDRESS)	PH 2:				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
2. The Florida document number of this limited	f liability company is: M24000015074				
Jurisdiction of its organization:	Delaware				
4. Date authorized to do business in Florida: _					
SECTION II (5-9 complete only the applicab					
5. New name of the limited liability company: (n	1133 BAISDEN RD LLC must contain "Limited Liability Company, " "L.L.C.," or "LLC.")				
(If name unavailable, enter alternate name adoption of the written consent of the managers or must contain "Limited Liability Company," "L.	nted for the purpose of transacting business in Florida and attach a managing members adopting the alternate name. The alternate name L.C." or "LLC.")				
6. If amending the registered agent and/or registered agent and/or the new registered office	stered officer address on our records. enter the name of the new e address here:				
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida Street Address				
-	, Florida				
the provisions of all statutes relative to the proj and accept the obligations of my position as rej	Registered Agent: Agent and agree to act in this capacity. I further agree to comply with the per and complete performance of my duties, and I am familiar with the gistered agent as provided for in Chapter 605, F.S. Or, if this the registered office address, I hereby confirm that the limited				

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:						
Title/ Capacity	Name	<u>Address</u>	Type of Ac			
	<u></u>		Add			
			Rer			
			Add			
			Add			
			Rem			
			Add			
aforementioned an	he law of which this entity is organ. /s/ Andrew	he official having custody of records ized.	1 NLLSHÄSSEE			

Filing Fee: \$25.00

<u>Delaware</u>

The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE

STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'OSI 1133

BAISDEN RD LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS

NAME TO '1133 BAISDEN RD LLC' ON THE TWENTY-SIXTH DAY OF

FEBRUARY, A.D. 2025, AT 4:51 O'CLOCK P.M.



Charuni Patibanda-Sanchez, Secretary of State

C. G. Sanchez

Authentication: 203037771 Date: 02-27-25

10016304 8320 SR# 20250790551