## L17000 144 473

(Re	equestor's Name)	
(Ad	ldress)	<del></del>
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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Amend

JUN 2 4 2019 I ALBRITTON

## **COVER LETTER**

Division of Corporations			
SUBJECT:	A HOLDIN	Ided Liability Company	
The enclosed Articles of Ame	endment and fee(s) are subn	nitted for filing.	
Please return all corresponder	nce concerning this matter to	o the following:	
	ALII	C AZULAY	
-		Name of Person	<del></del>
-	UGA	HOLDINGS	LLC
		Firm/Company	
	600	NE 185 S-	Γ
-		Address	
_		mi FL 331	79
	1 11: 0	City/State and Zip Code	
_	E-mail address: (to	City/State and Zip Code  25 men Do De (Fies No be used for future annual report notificat	earry Corr
For further information conce			
.1			- 1
Naga P	+10Y	at ( <u>75U</u> ) <u>2001 –</u> Area Code Daytime Te	3+58 lephone Number
O		•	•
Enclosed is a check for the fo	llowing amount:		
	3 \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING Registration	ADDRESS:	STREET/COURIER Registration Section	ADDRESS:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, F1, 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B. . .

UGA	+ HOLDINGS LLC	
(Name of the Limited	Liability Company as it now appears on our re A Florida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Lia Florida document number <u>L17000 1</u>		2017 and assigned ?
This amendment is submitted to amend the follow	ving:	•
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and contain the work  Enter new principal offices address, if applical  (Principal office address MUST BE A STREET)	ble:	LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX</u> )	
B. If amending the registered agent and/o registered agent and/or the new registered offi		ords, enter the name of the new
Name of New Registered Agent:	,	
New Registered Office Address:	Enter Florida street aa	ldress
		, 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 Type of Action Title Name<sub></sub> <u>Address</u> Investment Properties Lealty LLC 600 NE 1855T Miami FL 33179 □ Change Investment Properties Realty INC 600 NE185 ST and AMBR Miami FL 3319 @ Remove \_□ Change ☐ Remove \_□ Change □ Add ☐ Change ☐ Remove \_□ Change

□ Remove

☐ Change

D. If amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated_	June 10. 2019.
	Signature of a member or authorized representative of a member
	ARIC AZULAY Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00