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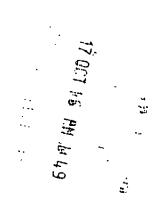
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: United Business Finance LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Wendy Vila Name of Person
Unicus Capital LLC
2425 Presidential Way
West Palm Beach FL, 33401 City/State and Zip Code Wendy @ unicus capital com E-mail address: (10 be used for future annual report notification)
Wendy @ unicus capital com E-mail address: (10 be used for future annual report notification)
For further information concerning this matter, please call:
Daviel Navarro at (860) 796-8959 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\Bigcup \text{\$55.00 Filing Fee & Certificate of Status}\$\Bigcup \text{\$Certified Copy tadditional copy is enclosed}\$\Bigcup \$Certified Copy tadditional copy is enc

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L	Business Finance LLC iability Company as it now appears on our records.) lorida Limited Liability Company)
The Articles of Organization for this Limited Liabil Florida document number <u>L 7 0 00 3</u>	ity Company were filed on 6 16 17 and assigned 3336
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the	"Limited Liability Company," the designation "L.L.C."
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO)	<u>SCI</u> .
B. If amending the registered agent and/or registered agent and/or the new registered office	
Name of New Registered Agent:	. 6
New Registered Office Address:	Enter Florida street address
-	, Florida

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

<u>l'itle</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
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ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more tee: If the date inserted in this block does not meet the applicable statutory filing rediment's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effective time ne 90th day after the record is filed.	e, at 12:01 a.m. on the earlie
d October 11th. 2017. Clency Lila Signature of a member or authorized representative of a	

Page 3 of 3

Filing Fee: \$25.00