## L08000 112571

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☐ PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
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S. HAWKES

JUL 8 2010

**EXAMINER** 

S. HAWKES

JUN 2 5 2018

**EXAMINER** 





June 25, 2010

JOSEPH HAYMORE 4532 W KENNEDY BLVD STE 320 TAMPA, FL 33609

SUBJECT: UNITED CAPITAL FUND LLC

Ref. Number: L08000112571

We have received your document for UNITED CAPITAL FUND LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Letter Number: 910A00015687

Suzanne Hawkes Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO:	Registration Sec Division of Corp						
SUBJECT: United Capital Fund LLC Name of Linkited Liability Company							
The er	closed Articles of A	mendment and fee(s) are sui	bmitted for filing.				
Please	return all correspon	dence concerning this matter	r to the following:				
			Joseph Haymore				
			Name of Person				
		Un	nited Capital Fund, LL	С			
			Firm/Company				
		_ 4	532 W. Kennedy Blvd	ste3	20		
			Address				
			Tampa, FL 33609				
			City/State and Zip Code				
		jhaymu	ore@unitedcapitalreo. to be used for future amoual repo	.com			
			•	or nouncemer	1)		
For fur	ther information co	ncerning this matter, please of	all:				
	Dea	nna Aliano	a <sub>1</sub> (_772 <sub>.)</sub>	626	-3815		
	Nume of	Person	Area Code &	Daytime Tele	phone Number		
Enclos	ed is a check for the	following amount:					
<b>[</b> ] \$25	.00 filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	[] nclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

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

United	Copi	tal Fund	LLC	- 1
( <u>Name of the Limited L</u> (A F	lability Compai lorida Limited L	ny as it now appears or liability Company)	our records.)	- 6 ·
The Articles of Organization for this Limited Lial	bility Company	were filed on 2	19/08	and assigned
Florida document number LO8000112	<u>571</u> .			
This amendment is submitted to amend the follow	ving:			3: (6
A. If amending name, enter the new name of t	he limited linb	ility company here:		The state of the s
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company,"	the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicab	ole:	4532 W. Kenned	ly Blvd	
(Principal office address MUST BE A STREET	ADDRESS)	Sute 3	<del>2</del> 0	
		Tampa, FL 3360	9	
Enter new mailing address, if applicable:		Same		
(Mailing address MAY BE A POST OFFICE Be	<u>0x)</u>		· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered agent and/or the new registered office			records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	lin	n Wright	<u></u>	
New Registered Office Address:	1002 SE Mo	nterey Commons Enter F	Blvd. Suite 100 Torida street addr	
		Stuart	, Florida	34996
		City	············	Zip Code
New Registered Agent's Signature, if changing Re-	gistered Agent;			
I hereby accept the appointment as registered of the provisions of all statutes relative to the projections of my position as registe being filed to merely reflect a change in the rescondany has been notified in writing of this ch	per and compl wed agenyas, p gistered office ange.	ete performance of m rovided for in Chapte	y duties, and I a er 608, F.S. Or, i afirm that the lim	m familiar with and if this document is ited liability

Page 1 of 2

If smooding the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managers of Managers of

= M= H = N	unger Sausging Member	·	
	Name	Address	Type of Actio
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p (M. O.C.)	ilog sny ather information, enter etas	nge(s) here: (Attach additional sheets, if necessary.)	
1	Houndant Holdin	as ILC address Change	. •
	i32 W. Kennedy BivdSig名文Tam	Λ	•
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	1000		
	Signature d'a mént	of or authorized representative of a szember	<u>-</u> _
		Joseph Haymore ed or printed mame of signee	
	СУР	Page 2 of 2	

Filing Fee: \$25.00