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COVER LETTER

TO:	Registration Se Division of Cor			
CUBII		ORLDWIDE REALTY LLC		
SUBJI	EC1:	Name of Limi	ted Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	nitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Patricia P. Urban		
			Name of Person	······································
		Urban Worldwide Realty L	LC	
			Firm/Company	
		155 Ocean Lane Dr. Unit #	1011	
			Address	
		Key Biscayne Fl 33149		
			City/State and Zip Code	1 · m.
		urbanworldwide1@gmail.co		
		E-mail address: (f	o be used for future annual report notific	cation)
For fur	rther information c	oncerning this matter, please ca	ill:	
Patrici	a P.Urban		305 393-7308 at (
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	ne following amount:		
□ \$2	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$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

URBAN WORLDWIDE REALT	Y LLC		
(Name of the Lim	ited Liability Compan (A Florida Limited Li	y <u>as it now appears on our rec</u> ability Company)	ords.)
The Articles of Organization for this Limited I	Liability Company v	were filed on <u>6/02/2009</u>	and assigned
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liabil	ity company here:	
The new name must be distinguishable and contain the	words "Limited Liabilit	ty Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		2015 Sept. 2015
(Principal office address MUST BE A STREET ADDRESS)			
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			max ∞
Enter new mailing address, if applicable:			T P
•	E BOV		97 =
(Mailing address MAY BE A POST OFFICE BOX)			10 to
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:		:	ords, <u>enter the name of the n</u>
New Registered Office Address:	155 Ocean Lane	Dr. unit #1011	
New Registered Office Address.		Enter Florida street ad	ldress
	Key Biscayne		, Florida <u>33149</u>
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the pro accept the obligations of my position as reg being filed to merely reflect a change in the	per and complete p gistered agent as p	performance of my duties rovided for in Chapter 60	s, and I am familiar with and 05, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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

<u>Title</u>	Name	<u>Address</u>	Type of Action
			🗆 Add
			□ Remove
			Change
			Add
		**	☐ Remove
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n effective date is listed	r than the date of filing: the date must be specific and cannot be prior	to date of filing or more than 90	(optional) days after filing.) Pursua	int to 605.026
ote: If the date insert cument's effective date	ed in this block does not meet the applicate on the Department of State's records	able statutory filing requirer	nents, this date will no	it be listed a
	a delayed effective date, but no er the record is filed.	ot an effective time, at	12:01 a.m. on the	e earlier
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Typed or printed name of signee

Filing Fee: \$25.00