## L09000086843

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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S. HAWKES FEB 9 - 2010

**EXAMINER** 

## COVER LETTER

то:	Registration Sect Division of Corpo		• .		
SUBJ					
2020		Name of Limi	ted Liability Company		
The er	nclosed Articles of A	mendment and fee(s) are sub	omitted for filing.		
Please	e return all correspond	dence concerning this matter	to the following:		
Amanda Brant					
	Name of Person				
United Family of Companies, LLC					
			Firm/Company		
Address					
		Ва	aton Rouge, LA 70816		
			City/State and Zip Code	<u> </u>	
	ation)				
For fu	orther information cor	cerning this matter, please c	all:		
	Ama	anda Brant	at ( 954 ) 5	52-4202	
	Name of F	Person	Area Code & Daytime	Telephone Number	
Enclo	sed is a check for the	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)	
	Registrat Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 see, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen	ions	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

United SMC LLC

	United Sivid, LLC		
( <u>Name of the Limited L</u> (A F	<b>iability Company as it now appea</b> lorida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liab Florida document number		09/09/2009 and a	ssigned
This amendment is submitted to amend the follow	•	HASSEE.	ssigned FILED PH12: 26
A. If amending name, enter the new name of t	he limited hability company he		. 22
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	any," the designation "LLC" of th	e abbreviation
Enter new principal offices address, if applical	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter the name</u>	of the nev
Name of New Registered Agent:	- · · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:			
	Ei	nter Florida street address	
	- C'	, Florida	
	City	Zip Co	ae

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGRM	United Family of Companies	3078 S.W. 38th Court Miami, FL 33146	✓ Add ☐ Remove
MGRM_	United Ventures Group, L	3078 S.W. 38th Court Miami, FL 33146	Add  Remove
<del></del>			Add Remove
			Add C Remove 20 Add 26 Remove
			Add Remove
D. If amend	ding any other information, enter chang	te(s) here: (Attach additional sheets, if necess	eary.)
Dated	February 01 , 20	010. m 200 nt	
	Signature of a member	r or authorized representative of a member	
		manda M. Brant	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00