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J. BRYAN

NOV -7 2011

EXAMINER

COVER LETTER

TO: Registration S Division of Co	ection rporations			
SUBJECT:	Urb	anlyfe, LLC		
		ited Liability Company	~	
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.	A. in	
Please return all corresp	ondence concerning this matter	r to the following:	THE PAINTS SEE STORIES	
		Joel Medgebow	TO THE PERSON OF	
		Name of Person		
		Megebow Law, P.A.		
	-	Firm/Company		
	487	75 Coconut Creek Pkwy	**	
		Address		
	Co	conut Creek, FL 33063		
		City/State and Zip Code		
		el@medgebowlaw.com		
	E-mail address: (to be used for future annual report notifica	ation)	
For further information	concerning this matter, please of	eall:		
Jo	el Medgebow	at (954)4	784223	
Name of Person		at (_954)4 Area Code & Daytime 7	Celephone Number	
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	ING ADDRESS:	STREET/COURIE	R ADDRESS:	
Registration Section Division of Corporations		Registration Section Division of Corporat	ions	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Urbanlyfe, LLC

THE RESERVE TO STATE OF THE PARTY OF THE PAR

(Name of the Limited L (A F	iability Company as it now appe lorida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liab Florida document number		March 31, 2011	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	<u>he limited liability company h</u>	<u>ere</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Com	pany," the designation "LI	.C" or the abbreviation
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter th	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	- CI	, Florida	7: 0 !
	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 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 **Title** Name | <u>Address</u> **Type of Action** MGRM Lisa Leo Urbaniyfe, LLC ✓ Add 4875 Coconut Creek Pkwy Remove Coconut Creek, FL 33063 ☐ Add Remove ☐ Add ☐ Remove ☐ Add Remove ___Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) October 31 2011 ignature of a member or authorized representative of a member Louis Leo Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00