13000104264

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2013 OCT -7 PH 3: 16
SEPRENSESSES FROM THE

OCT -8 2013 T. HARLPTON

COVER LETTER

Division of Co	rporations		
SUBJECT:	US	C OF FLORIDA LLC	
SUBJECT.	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
		JASON MOORE	
		Name of Person	
		USCG, LLC	
	**************************************	Firm/Company	
	14 NE	FIRST AVENUE - 2ND FLOOR	
		Address	
		MIAMI, FL 33132	
		City/State and Zip Code	·
	E-mail address: (t	o be used for future annual report notificat	ion)
For further information of	concerning this matter, please c	all:	
Name o	of Person	at (at Code & Daytime Te	elenhone Number
, and c	Ciben	Aud Code & Dayline IV	Acpitotic Number
Enclosed is a check for t	he following amount:		
\$25.00 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

MAILING ADDRESS:

TO:

Registration Section

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

USC OF FLORIDA LLC

(Name of the Limited Liab (A Flor	ility Company as it now appears ida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Florida document numberL13000104264	ty Company were filed on	07/23/2013	and assigned
This amendment is submitted to amend the following	g:		63
A. If amending name, enter the new name of the	limited liability company here		PH 3
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX			
B. If amending the registered agent and/or registered agent and/or the new registered office a		r records, <u>ente</u>	r the name of the new
Name of New Registered Agent:			
New Registered Office Address:	Ente	r Florida street d	nddress
_		, Florida	
	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 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>	<u>Name</u>	Address	Type of Action
MGR	U.S. CORRECTIONS, LLC	1201 NORTH ORANGE STREET, SUITE 700	Axabab
		WILMINGTON, DE 10801	Remove
			- □
			Remove
			Add
			Remove
		TASE	OC TI
		ron Trus Trus	₽
			_ب ص
			Add
			Remove
			_
			Add
			Remove
			_

D. If amend	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
Dated	09/30/2013
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	JASON MOORE
	Typed or printed name of signee

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Filing Fee: \$25.00

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