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OCT 0 7 2014 S. YOUNG

RUSSELL L. FORKEY, P.A.

2888 EAST OAKLAND PARK BOULEVARD FT. LAUDERDALE, FLORIDA 33306 TELEPHONE: (954) 568-4441 FACSIMILE: (954) 568-4180

September 26, 2014

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

Re: United College Advocates, LLC

Dear Sir/Madame:

Enclosed herewith please find the following:

- Cover letter;
- Articles of Amendment to Articles of Organization of United College Advocates, LLC;
- A check in the amount of \$25.00 made payable to Florida Department of State.

If you require anything further, please contact our office.

Very truly yours,

Stephanie A. Forkey Ivanik, CP, FRP

Certified Paralegal

Enclosure

COVER LETTER

TO: Registration Section Division of Corporations				,
SUBJECT: United Colle	ege Advocates	, LLC		
	Name of Limited Liability Cor	npany	SECT TALL	-
The enclosed Articles of Amendment a	nd fee(s) are submitted for filing	5 .	A A A A A A A A A A A A A A A A A A A	FILED
Please return all correspondence concer	ming this matter to the following	ÿ:	語句 Example 2007 Total	
Russ	sell L. Forkey, I	Ξsq	ON TAIL	D PH 3: 24
	Name of I	erson	·	
Russ	sell L. Forkey, l	⊃.A.	•	
	Firm/Con	ipany		
2888	BEast Oakland	Park Blvd.		
	Addre	SS		
Fort	Lauderdale, F	lorida 3330	06	
rforkey	City/State and	Zip Code		
<u></u>	E-mail address: (to be used for fut	ure annual report notification	on)	
For further information concerning this	matter, please call:			
Russell Forkey	at (9)	54, 568-444	11	
Name of Person	Area	Code Daytime Tele	ephone Number	
Enclosed is a check for the following an	nount:			
■ \$25.00 Filing Fee □ \$30.00 F	Filing Fee & \$55.00 Fi	ling Fee &	□ \$60.00 Filing Fee,	

Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

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

STREET/COURIER ADDRESS:

Certificate of Status &

Certified Copy (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

United College Advocates	•			
(Name of the Limit	ted Liability Compa (A Florida Limited)	ny as it now appears on o Liability Company)	ur records.)	SE F
The Articles of Organization for this Limited L. Florida document number L13000127572 This amendment is submitted to amend the following the control of the	iability Company	were filed on Septe		Rand assigned Fig. 3. 2
A. If amending name, enter the new name o	i the nimited had	mty company nere:		
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the design	ation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	2639 North Rive	erside Drive	
(Principal office address MUST BE A STREET ADDRESS)		Pompano Beach, FL 33062		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE		2001 N. Federa		ite G-316
B. If amending the registered agent and/ registered agent and/or the new registered of	or registered of		records, enter	the name of the new
Name of New Registered Agent:	George Sa	_		
New Registered Office Address:	2001 N. Fe	deral Highway, Su	ite G-316	
	Enter Florida street address			
	Pompano E	Beach33062	, Florida	Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as regi	ed agent and agreer and complete	ee to act in this capac performance of my d	uties, and I am	familiar with and

Page 1 of 3

Mooge E Satafluso

If Changing Registered Agent, Signature of New Registered Agent

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 Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Adolfo Sanmartino	2639 North Riverside Dr.	
		Pompano Beach, FL 3306	2_ ■ Remove
AMBR	Adolfo Sanmartino	2639 North Riverside Dr	<u>·</u> □ Add
		Pompano Beach, FL 33062	2 _■ Remove
MGR	George Sarafianos	2001 North Federal Highway, Suite G-31	6 ■ Add
		Pompano Beach, FL 33062	P □ Remove
AMBR	George Sarafianos	2001 North Federal Highway, Suite G-316	 S ■ Add
		Pompano Beach, FL 33062	2 □ Remove
		·	 □ Add
			_□ Remove
		TALL AIR	6 14 0C
			Add —
	. ·		w 2

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ų	
*	
(The	ective date, if other than the date of filing:
Dat	ed January 5, 2013
	Signature of a member or authorized representative of a member
	DOLFO SANMARTINO
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

14 OCT -1 PH 3: 2
SECRETAKE :- STATE
TALL ALLASSE: FLORIO