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FEB 2 0 2014 T CLINE

THE PERSON NAMED IN

CHARLES MOORE 201 N FRANKLIN ST. STE 2000 TAMPA, FL 33607

SUBJECT: UJPCONSIGNMENTS, LLC

Ref. Number: L13000148375

We have received your document for UJPCONSIGNMENTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 314A00003315

B 19 PH 1: 26

COVER LETTER

Division of Corpo				
SUBJECT: LTP(COSSIGNMENT Name of Limi	ited Liability Company		
The enclosed Articles of Ar	nendment and fee(s) are subr	mitted for filing.		
Please return all correspond	ence concerning this matter t	to the following:		
	Charles	Name of Person	<u> </u>	
	444444	Firm/Company		
	201 N.Fr	anklin St. St.	e 2000	
	Tampa P	City/State and Zip Code	2014 FE SECON	aman co
	E-mailandress: (to be used for future annual report notific	M 3 8	
For further information con	cerning this matter, please ca	all:		
Howard G Name of F	Sordon	at (812) 363 - 1	5244 Similar Selephone Number	See April 1
Enclosed is a check for the	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 (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

UTO Consignments UC
(Name of the Amited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 12/11/3 and assigned Florida document number <u>L13000148378</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent: New Registered Office Address: SOPE JOURSON SI. Enter Florida street address Tanga
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 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

MGR = M $MBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
NER	Alice Goslin	8901 w. Villa Rosa	Pap Add
		Tempa, Fl 33611	Kemove
Marz	Layne Williams	Tanya & 33602	X Add
		tanya, 81 33602	Remove
			2014 Feb B 19 Sept Add Remove
		•	Add
			Remove Add Remove

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Effective date,	if other than the	e date of filin	g:		((optional)		
The effective date								
the date this docu	ment is filed by the F	lorida Departme	nt of State)	iled date and cannot	be more than 90 c	iays ancr		
the date this docu	ment is filed by the F	lorida Departme	nt of State) , 2014	orized representativ		lays after		-
the date this docu	ment is filed by the F	lorida Departme	nt of State) , 2014 Months of Authorities of Authorities (Authorities	·		lays after		_

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Filing Fee: \$25.00