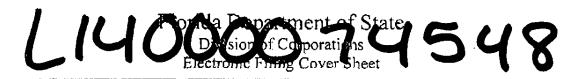
Division of Corporations

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To:

Division of Comporations

Pax Number : (850) 617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : 120080000090

Phone : (305) 670-1991

Fax Number : (305) 670-1993

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **UMA 14 LLC**

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NOV 18 2015 J. HARRIS Help

11/17/2015

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UMA 14 LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records, Liability Company))
The Articles of Organization for this Limited Liability Company florida document number L14000074548	were filed on 05/07/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	fity Company," the designation "LLC"	or the abbreviation,"L.L.C."
nter new principal offices address, if applicable:	475 BRICKELL AVE #514	28 8
Principal office address MUST BE A STREET ADDRESS)	MIAMI FL, 33131	
		F 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
nter new mailing address, if applicable:	475 BRICKELL AVE #514	
Mailing address MAY BE A POST OFFICE BOX)	MIAMI FL, 33131	Spr. 1
s. If amending the registered agent and/or registered o	flice address on our records	enter the name of the
egistered agent and/or the new registered office address her		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Flor	-ida
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	LOCATION3 INVESTMENTS	475 BRICKELL AVE	■ Add
		STE 514	
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