Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone

: (561)694-8107

Fax Number

: (561)694-1639

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

Email Address:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **COLLEGIUM UCA MANAGER, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Collegium UCA Manager, LLC								
(Anne of the Dim)	(A Florida Limited L	nv as it now appears on on Liability Company)	r records.)					
The Articles of Organization for this Limited L	Jability Company	were filed on March 19	, 2015	and	d assigr	ned		
This amendment is submitted to amend the foll	owing:							
A. If amending name, enter the new name o	f the limited liab	ility company here:						
The new name must be distinguishable and contain the v	words "Limited Liabil	lity Company," the designati	on "LLC" or the	abbreviatio	n "L.L.C	1 35		
Enter new principal offices address, if applicable:		7900 Glades Road, Suite 540						
(Principal office address MUST BE A STREE		Boca Raton, FL 33434						
								
Enter new mailing address, if applicable:		7900 Glades Road, Su	ite 540					
(Mailing address MAY BE A POST OFFICE BOX)		Boca Raton, FL 33434			 ,			
				3 - 1	6			
B. If amending the registered agent and registered agent and/or the new registered o			records, <u>ente</u>	r the na	12m	the new		
Name of New Registered Agent:	Corporate Creat	tions Network, Inc.				gera-ser.		
New Registered Office Address:	11380 Prosperit	ty Farms Rd., #221 E			ë	·		
		Enter Florida sire						
	Palm Beach Ga	City	, Florida <u>-</u>	Florida 33410 Zip Code				
New Registered Agent's Signature, if changing	Registered Agent:			-2,- 0		•		
I hereby accept the appointment as registere		ee to get in this canace	to I further a	aree to c	omnlu	with 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

Jessica Morales, Special Secretary

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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>	<u>Name</u>	Address	Type of Action
AMBR	Benjamin Macfarland	400 N. Congress Ave., Suite 100	
		West Palm Beach, FL 33401	■ Remove
			Change
MGR	PCH Collegium, LLC	c/o Pebh Capital	= Add
		7900 Glades Rd., Suite 540	Remove
		Boca Raton FL, 33434	Remove Change Add Remove Change Add Remove Change Add Remove Change
AMBR	PCH Collegium, L.I.C	c/o Pebb Capital	
		7900 Glades Rd., Suite 540	□ Remove
		Boca Raton, FL 33434	☐ Change
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			Remove
			□ Change

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Effective of	date, if other than the d	ate of filing:				(optional)	25		
Note: If the	re date is listed, the date must have date inserted in this blocks effective date on the Dep	k does not mee	rt the applicabl	date of filing or n e statutory filir	oore than 90 day	s after filing. is, this date) Pursuant will not b	to 605,07 De listed	207 (3) as the
the record) The 90	i specifies a delayed of th day after the recor	effective dat d is filed.	te, but not a	n effective	time, at 12	:01 a.m.	on the	earlier	of:
Dated	March 4	,	2016						
	S	ignature of a me	mber or authoris	zed representativ	e of a member				
			Todd Ro	-					
		T	yped or printed	name of signee				بعبد	

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Filing Fee: \$25.00