# 115000113529

(Re	questor's Name)	
(Ad	dress)	<u>.</u>
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300299977613

06/12/17--01029--003 \*\*25.00

17 JUN 12 PH 12: 06
DIVISION OF CORPORATIONS

O SIMMONS JUN 1 4 2017

## **COVER LETTER**

		ation Secti n of Corpo		, <i>'</i>		
SID ID		M HOLDI	NGS LLC			
SUBJEC	-1; <u>-</u>		Name of Lim	ited Liability Company		
The encl	osed Ar	ticles of An	nendment and fee(s) are sub	mitted for filing.		
Please re	turn all	corresponde	ence concerning this matter	to the following:		
			ANTONIO REGOJO			
				Name of Person		
			REGOJO LAW, PA			
				Firm/Company		
			12550 BISCAYNE BLVD	STE 110		
				Address		
			MIAMI, FL 33181			
				City/State and Zip Code		
		-	E-mail address: (1	to be used for future annual rep	port notification)	
For furthe	er inforr	nation conc	erning this matter, please ca	all:		
ANTON	IO REG	OJO		305 814-8	299	
		Name of Pe	rson		Daytime Telephone Number	
Enclosed	is a che	ck for the f	ollowing amount:			
<b>=</b> \$25.0	00 Filing	; Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified (	e of Status &

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

UCM HOLDINGS LLC	
( <u>Name of the Limited I</u> (A	jability Company as it now appears on our records.  Torida Limited Liability Company)
The Articles of Organization for this Limited Liabi	lity Company were filed on 06/30/2015 and assigned
Florida document number L15000113529	·
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of th	e limited liability company here:
The first the first the first fame of the	s "Limited Liability Company," the designation "LLC" or the abbrevation L.C."
	<u> </u>
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.C."
Enter new principal offices address, if applicabl	
	OF P
<u>(Principal office address MUST BE A STREET A</u>	DDRESS)
	<u> </u>
	e:  DDRESS)
Enter new mailing address, if applicable:	
, 11	W/A
(Mailing address MAY BE A POST OFFICE BO	<u></u>
	ALL INVESTMENT OF THE PROPERTY
	registered office address on our records, enter the name of the ne
registered agent and/or the new registered office	address here:
Name of New Registered Agent:	
Name of New Registered Agent.	
New Registered Office Address:	
-	Enter Florida street address
	, Florida
<del>-</del>	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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JULIO ULICH	2401 ANDERSON ROAD APT 13	
		CORAL GABLES, FL 33130	■ Remove
			Change
			□ Remove
			Change Change Change
<del></del> -			M OF COMPOSITE
			Remove
			Change
			Remove
			Change
			Remove
			Change
<u></u>			Add
			Remove

	,	,	
			T JUN 12 PH 12: 06 DIVISION OF CONF GRAFICHS
			JUN 12 PH IZ: 06 ISION OF CONTROLATION
			***
		· ·	
	ust be specific and cannot be pri block does not meet the app	or to date of filing or more than 90 licable statutory filing requires	(optional) 0 days after filing.) Pursuant to 605.0207 ments, this date will not be listed as t
the record specifies a delayed	ed affective date, but r	not an effective time, at	12:01 a.m. on the earlier of
Dated JUNE 2ND	, 2017 Mmm	·	
	Signature of a member or au	thorized representative of a mem	ber

Page 3 of 3

Filing Fee: \$25.00