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## **COVER LETTER**

	egistration Se ivision of Corp			•			
		TEGRATED LIVING, LLĈ.	*	•			
SUBJECT	:	Name of Limi	ted Liability Company		<u> </u>		
The enclos	ed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
		ndence concerning this matter					
		Alexandro Bolaños					
			Name of Person				
		URBAN CORE INTEGRA	TED, LLC.				
			Firm/Company	_			
		820 NW 7 Avenue, Apt. #	206				<u>:</u>
	Address				······································	201	
		Miami, FL 33136				11.50	記録 空間
			City/State and Zip Co	ode		– <b>19</b> f 60	Fige
	alex@miamiintegrated.com					CORF C	
		E-mail address: (	to be used for future and	nual report notifica	ation)	2; 2;	55
For further	r information c	oncerning this matter, please ca	all:			ລິ	5.5 :::
Alexandro	Bolaños		786	246-5333			0.
<del></del>	Name o	f Person	at () Area Code	Daytime T	elephone Number	_	
Enclosed i	s a check for th	he following amount:					
□ \$25.04	O Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing F Certified Copy (additional copy i	y	S60.00 Filing I Certificate of Certified Copy (additional copy)	Status & y	
R D		Section Corporations	Reg Divi	et Address: istration Section of Corpo	orations		
P	O. Box 632	<u>'.</u>	ine	Centre of Tal	ranassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIAMI INTEGRATED LIVING, LLC.		بسر سيد
(Name of the Limited Liab	ility Company as it now appears on ou da Limited Liability Company)	r records.)
(771011	an company	3 C. C.
The Articles of Organization for this Limited Liability	Company were filed on July 14, 2	and assigned and assigned
Florida document number L15000117853		? 📜
Tiorida document nomoci	<del></del> '	35 E
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
URBAN CORE INTEGRATED, LLC.		
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register		, 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:	Enter Florida stre	ot address
	1311Q 1 107 law 30 C	
		, Florida
	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 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 =	<b>Authorized Member</b>	

<u>Title</u>	Name	Address	Type of Action
			□ Add
			□Remove
			☐ Change
			□Add
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ective date, if other than a effective date is listed, the date te: If the date inserted in this tument's effective date on the	must be specific and c s block does not me	annot be prior to date et the applicable s	of filing or more than	(optional) 90 days after filing.) Pursu rements, this date will n	iant to 605.020 of be listed a
cord specifies a delayed effe s filed.	ctive date, but not a	n effective time, a	1 12:01 a.m. on the e	arlier of: (b) The 90th	day after the
ed March 16th		2020			