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COVER LETTER

TO:	Registration Se Division of Cor					
SUBJ	ECT: <u>830 L</u> E	EE ROAD INVESTMENT, L Name of Lim	LC ited Liability Company	·		
		Amendment and fee(s) are sub	· ·			
i icasi	rotum an correspe	machee concerning this matter	to the following.			
		ALEXANDER UDALO	ov.			
			Name of Person			
		830 LEE ROAD INVES	STMENT, LLC Firm/Company			
			1 mis company			ZX.
		830 LEE RD.		···	16 JUN -6	CRE
			Address		1	중꽃
					ar.	MASSEE!
		ORLANDO, FL 32810			=	
			City/State and Zip Code		 	(T) (
		audalov@umaco.org E-mail address: (to be used for future annual report notif	ication)	AM 11: 06	FILORIDA
For fu	rther information c	oncerning this matter, please ca		·		
ALE	XANDER UDAL	ov	at (<u>786</u>) 516-1094			
		f Person		Telephone Number		
Enclo	sed is a check for the	ne following amount:				
⋤ \$2	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 Sta Certified Copy (additional copy is e	atus &	
	MAII.	ING ADDRESS:	STREET/COURI	FR ADDRESS		

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

830 LEE ROAD INVESTME		
(Name of the Limited Liabil (A Florid	ity Company as it now appears on our records.) Ita Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 03/08/2016	and assigned
Florida document number <u>L16000047963</u>	<u></u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	هره فيس
<u> </u>		5 PG
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or the	ne abbreviation L.L.C.
Enter new principal offices address, if applicable:		1-6 SER
(Principal office address MUST BE A STREET ADD	RESS)	= =====================================
Trincipul office dual ess most be n strong the		- 0,5
		8 5
T. 4		<i></i>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	-	
B. If amending the registered agent and/or regi registered agent and/o <u>r the new registered office ad</u>		ter the name of the new
registered agent and/or the new registered white ad-	uress here.	
Name of New Paristand Agents		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, 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 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>	<u>Name</u>	Address	Type of Action
MGR	UMACO US, LLC	830 LEE ROAD, ORLANDO, FL 32810	
			🔀 Remove
			Change
MGR	ALEXANDER UDALOV	830 LEE ROAD, ORLANDO, FL 32810	I X Add
			Remove
			□.Change
			ASSECTION STATES
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