Florida Department of State

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN UNDER PRICED, LLC

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Corporate Filing Menu

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COVER LETTER

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SUBJECT	UNDER	PRICED, LLC		
acase	·	Nume of Lin	nited Liabitity Company	
The enclos	cd Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ondence concerning this matter		
		Cheyenne Mosaley		
			Name of Person	
		Legalzoom.com, inc.		•
			Firm/Company	
		101 N. Brand Blvd., 111	h Fir.	
			Address	·——-
		Glendale, CA 91203		
			City/State and Zip Code	
		gvaccaro101@gmailcon		
For further	information o	E-mail address: (concerning this matter, please of	to be used for fluture annual report no all:	tification)
Imeida Va	rsquex		323 962-8600	ext 7950
	Name o	f Person		ne Talephons Number
Enclosed is	a check for the	he following amount:		
\$25.90	Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	回 \$55.00 Filing Fee & Certified Copy (additional copy is sectored)	13 560,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. B	ING ADDRESS: sation Section of Corporations ox 6327 ussee, FL 32314	STREET/COUR Registration Section Section of Corporation of Corporation Building 2661 Executive Country	rations Tenter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UNDER PRICED, LLC		
Came of the Limited Li	ability Company as it now apuears or orda Limited Limbility Company)	anr records
The Articles of Organization for this Limited Liabili	ry Company were filed on 04/11	/2016 and assigned
7.16000071028		
Florida document number L16000071028	·	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new unme of the	limited liability company here:	
The new name must be distinguishable and end with the words	s "Limited Linbility Company," the devi	gautics "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable		page
(Principal office address MUST BE A STREET AL	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
The state of the s	×	
registered agent and/or the new registered office: Name of New Registered Agent:	albut say uc. g.	
	·_	
New Registered Office Address:	Enter Florida	street address
	City	, FloridaZp Code
New Registered Agent's Signature, if changing Regis	*	
I hereby accept the appointment as registered as provisions of all statutes relative to the proper as accept the obligations of my position as registere being filed to merely reflect a change in the registerm company has been notified in writing of this char	ent and agree to act in this cap nd complete performance of my ed agent as provided for in Cha stered office address, I hereby o	odulies, and I am familiar with and exper 605, F.S. Or, if this document is
-	If Changing Registered Agent	Signature of New Requisioned Agent
	Page 1 of 3	
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		\$50 D

1916223191

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR ≈ Authorized Member Title Name Address Type of Action □ Add □ Remove _□ Add □ Remove □ Add □ Remove .∏ Add _□ Remove _ Add _□ Remove 2018 D Add S 30 D

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Article IV. Please I	update AMBR Dominic A. Vaccaro's name to Dominick A. Vaccar
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	an the date of filing: (aptional) ic, cannot be prior to date of receipt or filed date and cannot be more than 90 days after by the Florida Department of State)
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