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D. SCOTT OCT 0 4 2016

COVER LETTER

TO: Registration So Division of Coo					
ULAK LL	С				
SUBJECT:	Name of Lin	nited Liability Company			
	Amendment and fee(s) are sub	-			
	ROBERTO E MACHO				
		Name of Person	 		
	UHY MACHO & ASOCI	ADOS			
		Firm/Company			
	1110 BRICKELL AVENU	JE, SUITE 806			
		Address		TAL SEC	
	MIAMI , FL 33131			12 B	7
	RMACHO@UHY-MACH	City/State and Zip Code O.COM		TARY OF STATE ASSEE, FLURIDA	
	E-mail address:	to be used for future annual report notifi-	cation)	PACE TO STATE OF THE PACE TO S	U
For further information c	concerning this matter, please c	all:)
ROBERTO E. MACHO		305 503-2700		** ***	
Name o	of Person	at () Area Code Daytime	Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	
	ING ADDRESS:	STREET/COURIE	R ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 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

ULAK LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number L16000169291	Company were filed on 09/12/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limi</u>	ited liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		76. 5
Mailing address MAY BE A POST OFFICE BOX)		2 T
If amending the registered agent and/or regist egistered agent and/or the new registered office addition		enter the name of the
ognotett agont and of the new registered office addr	icos nere.	2 P. S.
Name of New Registered Agent:		2 *
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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	Anthony Zeitoune Makwawji	Av 115#106-40 IV. Edif Holiday	
		Palace URB El Bosque San Jose,	Remove
		VA 99999 Venezuela	□ Change
MGR	MGR Jose Zeitoune Makwawji	AV Valle Blanco 5-B Lanzarote	
		Agua Blanca-Valencia BO, 02001	■ Remove
		Venezuela	☐ Change
MGR	Anthony Zeitoune Makwakji	Av 115 c/c Av 116 El Bosque	🖪 Add
		Edif Holiday Place IV #10-A	☐ Remove
		VA 02001 Venezuela	Change
MGR	AGR Jose Zeitoune Makwakji	Av 106 Resd Valle Blanco	■ Add
		Edif Lanzarote #5-B Agua Blanca	Remove
		VA 02001 Venezuela	□ Change
			Add
			Remove
			☐ Remove

·	other information, enter change(s) here: (Attach o	www.sorius oriocia, ij ricocasury.j
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		55 S
ffective date, if	other than the date of filing:	(ontional)
Note: If the date i	listed, the date must be specific and cannot be prior to date of filin inserted in this block does not meet the applicable statutor we date on the Department of State's records.	ng or more than 90 days after filing.) Pursuant to 605.020' y filing requirements, this date will not be listed as
e record speci	fies a delayed effective date, but not an effect	tive time, at 12:01 a.m. on the earlier o
The 90th day	after the record is filed.	1
Dated	9/10, 2016	
	Signature of a member of withprized represer	ntarive of a member
	To 7/1-1	10/2.11
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