116000180237

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





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COVER LETTER

Division of Co			
SUBJECT:	Unity 4, LLC		
SUBJECT:	Name of Limit	ed Liability Company	······································
The enclosed Articles o	f Amendment and fee(s) are subm	nitted for filing.	
Please return all corresp	ondence concerning this matter to	o the following:	
	David S. Mallitz		
	David S. Maille	Name of Person	
	DeRettolo Holding	ne II.C	
		Firm/Company	
	15436 North Florida Avenue, Suite 200 Address		
		Address	
	Tampa, FL 33613	3	
		City/State and Zip Code	
	dmallitz@debart	•	
	E-mail address: (to	be used for future annual report no	tification)
For further information	concerning this matter, please ca	ll:	
James D. Palermo		at (813)264-88	303
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
□ \$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 Status & Certified Copy (additional copy is enclosed)

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

Unity 4, LLC		
(Name of the Limited Liability C (A Florida Lin	Company as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number <u>L16000180237</u>	pany were filed on September 27, 2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	SS)	
		
		8
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		2 399
		9.
B. If amending the registered agent and/or register registered agent and/or the new registered office address	ed office address on our records, <u>enter</u> s here:	the name of the new
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>	<u>Address</u>	Type of Action
MGR	Allison Lutich	15436 North Florida Avenue, Suite 200, Tan	npa FL 33613 Ŏ Add
			□ Remove
			☐ Change
			Add
		□ Remove	
		Change	
<u> </u>	<u> </u>		Add
		☐ Remove	
		Change	
		□ Remove	
			Change
			Add
		□ Remove	
		Change	
		Add Sign	
			Q SS □ Remove
			Change

. If amen	ding any other information, enter	change(s) here: (Attach	additional sheets, if necessary.)		
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(If an effect Note: If documer the reco	e date, if other than the date of fili- tive date is listed, the date must be specific a the date inserted in this block does not it's effective date on the Department of ard specifies a delayed effective ofth day after the record is filed	nd cannot be prior to date of fili meet the applicable statutor State's records. date, but not an effect	ry filing requirements, this date will	not be listed	as the
Dated _	October 14	2016			
_	David Mach	a hember or authorized repres	entative of a member	16 OCT	
	David S. Mallitz	7		25	
		l'yped or printed name of si	gnee	 ₹ %	
		Page 3 of 3		: 56	

Filing Fee: \$25.00