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## **COVER LETTER**

TO: Registration Division of C	Section Corporations		
UNCOR	K TRAVEL & LIFESTYLE L	LC .	
	Name of L	imited Liability Company	
	of Amendment and fee(s) are so		
	NADINE WAGONER		
	UNCORK LIFESTYLE LL	Name of Person	E = -11
	5379 LYONS ROAD, #62	Firm/Company 5,	ZIII IPR 15 TALLIANASSEI
	COCONUT CREEK, FL 3	Address 3073	A b 5
	NADINE@JUMPCOMMUN	City/State and Zip Code IICATIONS.BIZ	
For further information of	E-mail address: concerning this matter, please of	(to be used for future annual report notical):	fication)
NADINE WAGONER  Name of Person		305 8040218 at ()_	
Name (	of Person .	Area Code Daytime	e 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)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAIL	ING ADDRESS:	CTD F F T (CO LID VI	

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

(Name of the Limite	ed Liability Comp	any as it now annears on our records	
	(A Florida Limited	any as it now appears on our records Liability Company)	<u>s-</u> )
The Articles of Organization for this Limited Li	ability Company	v were filed on MARCH 23, 201	7 ,
lorida document number L17000066568		word ined on	and assigned
	<del></del> -		
his amendment is submitted to amend the follo	wing:		
a. If amending name, enter the new name of	the limited list	uility compony horo	
Jncork Lifestyle L.L.C	THE MINICO HAL	mity company nere:	
he new name must be distinguishable and contain the wo	ords "Limited Liab	ility Componer "the daily at the	
nter new principal offices address, if applica		5379 Lyons Road	Air PR
(Principal office address MUST BE A STREET ADDRESS)		#625	552
		Coconut Creek, FL 33073	C. T.
			FLOST of
Enter new mailing address, if applicable:		5379 Lyons Road	型品の
(Mailing address MAY BE A POST OFFICE BOX)		#625	P C
		Coconut Creek FL 33073	
If amending the registered agent and/or	r registered of	Tire address on our manual-	
gistered agent and/or the new registered offi	ce address her	e:	enter the name of the
Name of New Registered Agent:	Nadine Wagor	ner	
New Registered Office Address:	52701		
	5379 Lyons Ro	つっぺ せんつん	

## 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.

Coconut Creek

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	NADINE WAGONER		
		152 NW ASTU AVE DEFOCIED	<b>=</b> Add
		152 NW 45TH AVE, DEERFIELD BEACH FL 33442	<b></b>
		5379 LYONS ROAD, #625,	Remove
		COCONUT CREEK FL, 33073	
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ffective date, if other than the date of filing:					
an effective date is listed, the date must be specific and cannot be lote: If the date inserted in this block does not meet the a ocument's effective date on the Department of State's reasonable.	ADDIICABIE STAINTA	ling or more than 90 ory filing requiren	(optional) days after filing, tents, this date	) Pursuant i will not b	to 605.02 e listed a
e record specifies a delayed effective date, bu The 90th day after the record is filed.	ıt not an effe	ctive time, at .	12:01 a.m. (	on the e	arlier (
APRIL 10TH, 2019	·				
Martino (1)	Moran	_			
					_
Signature of a member or	authorized repres	entative of a membe	:r		

Page 3 of 3

Filing Fee: \$25.00