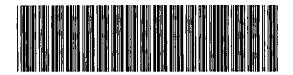
## 117000076812

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





100298680631

05/08/17--01024--013 \*\*25.00 17 ##25.00

MAY 1 0 2017 Y SULKER

## **COVER LETTER**

TO:	Registration Se Division of Cor			
CHRI	ECT:	UNITED CAPITAL GR	OUP C LLC	
3000	LC1	Name of Limi	ted Liability Company	
	••			
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	•
Please	return all correspo	indence concerning this matter	to the following:	
		MARIANA A	ANDALUZ	
			Name of Person	
		UNITED CA	APITAL GROUP C LLC	
			Firm/Company	
		11555 HE	RON BAY BLVD SUITE	200
			Address	
		CORAL SI	PRINGS, FL 33076	
			City/State and Zip Code	
			Damericanrealty.us to be used for future annual report no	(Continu)
			·	incation)
For fu	rther information c	oncerning this matter, please ca	all:	
MARIANA ANDALUZ			at ( <u>561</u> ) 716-1	1086
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclo	sed is a check for th	ne following amount:		
<b>Ճ</b> \$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 Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

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

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	MARIANA ANDALUZ	11555 HERON BAY BLVD STE 200	Add
		CORAL SPRINGS, FL 33076	
			Change
MGR	SANDRO ZEGARRA	11555 HERON BAY BLVD STE 200	Œ Add
		CORAL SPRINGS, FL 33076	Remove
			Change
			🗆 Add
			Remove
			☐ Change
		- i	. a
			- <del></del>
		1.0 RA	Add (1
		مخر	_⊔#Gillove
			Change
	-		<b>-</b>
			□ Add
			□ Remove
			Change
			_□ Remove
			☐ Change

							_
 •	ı						
<u>-</u>			 	-			-
 	<del></del>		 <del></del>		 	·	-
 			 				_
 	<del>,</del>		 		 		_
 			 		 		-
 					 		_
 		•-					-
 					 		-
 							_
							_
 			 				-
 	<del>-</del>				 <u>:</u> -		-
						- Tak	
					388	1	
 <u>.</u>					 	<b>©</b> 3	- ;
 					 mig.	735 216	:
					. 021 1021	學	<i>1</i> . •
 					2.	100	-

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00