118000141560

Office Use Only



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DIVISION OF CORPORATION 2

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COVER LETTER

	Registration Sec Division of Corp			
4	UHO, LLC			
SUBJEC	1:	Name of Limi	ted Liability Company	
The enclo	sed Articles of A	amendment and fee(s) are subr	nitted for tiling.	
Please ret	urn all correspon	dence concerning this matter t	o the following:	
		Danelle Hoffer		
		UHO, LLC	Name of Person	
		525 West Plant Street	Firm/Company	
		Winter Garden, FL 3478	Address 7	
		dhoffer@cynergreen.com	City/State and Zip Code	
		E-mail address: (to	o be used for future annual report notifi	cation)
For furthe	er information co	neerning this matter, please ca	II:	
Danelle	Hoffer		407 605-3500	
	Name of	Person		Telephone Number
Enclosed	is a check for the	r following amount:		
□ \$25.0	0 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our re Liability Company)	cords.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000141560</u> .	v were filed on 6-7-2018	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liah	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation	'LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	525 West Plant Street		
(Principal office address MUST BE A STREET ADDRESS)	Winter Garden, FL 3478	37 📮 🖁	
		SEC VISIO	
Enter new mailing address, if applicable:	525 West Plant Street	AUG 20	
(Mailing address MAY BE A POST OFFICE BOX)	Winter Garden, FL 3478		
wanting days case of the transfer			
		∂ ¥	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		ords, <u>enter the name of the n</u>	
Name of New Registered Agent:		<u></u>	
New Registered Office Address:			
	Enter Florida street ac	ldress	
	, Florida		
	City	, F1011da Zip Code	
New Registered Agent's Signature, if changing Registered Agents	<u>:</u>		
New Registered Agent's Signature, if changing Registered Agent's	<u>:</u>	I further agree to comply wit	

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
AMBR	Ricardo Pinheiro	9369 Trianana Circle	
		Winter Garden, FL 34787	= Add
		winter Galden, i.e. 54707	Remove
			Change
			□ Remove
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	6-7-2018		65 A	
ective date, if other than the effective date is listed, the date made: If the date inserted in this becoment's effective date on the listense.	ast be specific and cannot be prior block does not meet the applic	able statutory filing requ		
record specifies a delaye The 90th day after the re		t an effective time,	at 12:01 a.m. on	the earlier o
August 16	2018			
Ja	Signature of a member of auth	private rancovantation of	aambar	
·	Signature of a metwoer of auth	orizeu representative of a n	ICHIDCI	

Page 3 of 3

Filing Fee: \$25.00