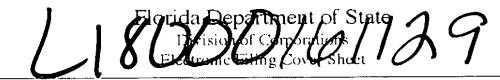
To: 18506176383 From: 12147128131 Date: 08/02/18 Time: 7:03 PM Page: 01/04

8/2/2018

(1)

Division of Corporations



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To: 18506176383 From: 12147128131 Date: 08/02/18 Time: 7:03 PM Page: 02/04

(((H18000225667 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

URBNOco LLC			
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our re Liability Company)	cords.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000161129</u> .	were filed on 07/02/2018	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company " the designation "	"LLC" or the abbreviation "L.L. C."	
	5020 Biscyane Blvd.	T. 1/4 6	
Enter new principal offices address, if applicable:	Miami, FL 33137	्रिंग हा ना	
(Principal office address MUST BE A STREET ADDRESS)			
		 	
Enter new mailing address, if applicable:	5020 Biseyane Blvd.		
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33137	5. 9	
maning address man obtain our over tool board		<u> </u>	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:		ords, ciner the mane or the in	
New Registered Office Address:			
	Enter Fiorida sneet address		
		, Florida	
and the state of t	Сиу	zip Coae	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agi provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dutie provided for in Chapter 6	s, and I am familiar with and 605, F.S. Or, if this document is	
If Cha	nging Registered Agent, <u>Signa</u>	ture of New Registered Agent	

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To: 18506176383 From: 12147128131 Date: 08/02/18 Time: 7:03 PM Page: 03/04 (((H18000225667 3)))

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	ARMANDO LOZANO OJEDA	5020 Biscyane Blvd.	
		Miami, FL 33437	□ Remove
			☐ Change
			□ Adri
			Remove
			□ Change
		🗀 Add	
		Remove	
			の Change T
			9: 49: 0RIDA
			Change
			□ Add
			☐ Remove
			☐ Change
			Add
			Remove
			☐ Change

Date: 08/02/18 Time: 7:03 PM Page: 04/04 To: 18506176383 From: 12147128131 (((H18000225667 3))) D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(If an effective date is listed, the date insist be specific and cannot be prior to date of filing or more than 90 days after filing / Pursuant to 605,0207 (3)(b) (optional) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. July 9 Dated ____ 2018 Signature of a member or authorized eprasentative of a member-

Page 3 of 3

Typed or primed name of signed

Armando Lozano Ojeđa

Filing Fee: \$25.00