## 4800178953

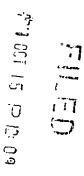
| (Requestor's Name)                      |
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| (Address)                               |
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| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

| . Division of C          | Corporations   |  |   |             |
|--------------------------|--|--|---|-------------|
| Mondovi SUBJECT:         | LLC  |  |   |             |
| 30b)EC1                  | Name of Lim  | ited Liability Company   |   |             |
| The enclosed Articles    | of Amendment and fee(s) are sub  | omitted for filing.  |   |             |
| Please return all corres | spondence concerning this matter                                       | to the following:  |   |             |
|                          | Edward S Hand Jr   |  |   |             |
|                          |  | Name of Person   |   | 77 OCT 15   |
|                          | 54082 Marlee Road  | Firm/Company   |   |             |
|                          |  | Address  |   | D 12: 0°    |
|                          | Callahan Florida 32011   | City/State and Zip Code  | -بر   | ٥           |
|                          | 904@3786904.com<br>E-mail address: (                                   | to be used for future annual report not  | fication)   |             |
| For further information  | concerning this matter, please co                                      | all:   |   |             |
| Edward S Hand Jr         |  | 904 3786904  |   |             |
| Nane                     | e of Person  | at ()<br>Area Code Daytim  | e Telephone Number  |             |
| Enclosed is a check for  | r the following amount:  |  |   |             |
| ■ \$25.00 Filing Fee     | □ \$30.00 Filing Fee &<br>Certificate of Status                        | □ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)            | S60.00 Filing Certificate of Certified Co (additional cor | of Status & |
| Regi<br>Divis            | ILING ADDRESS:<br>stration Section<br>sion of Corporations<br>Box 6327 | STREET/COURI<br>Registration Section<br>Division of Corpor<br>Clifton Building | on  |             |

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mondovi LLC L18000178953 (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 25, July 2018 and assigned Florida document number  $\frac{1.18000178953}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Union Square Ventures IIc The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Ū (Mailing address MAY BE A POST OFFICE BOX) رزا B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_, Florida \_\_\_ City

## 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   |
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| -                   | 1, October 2018   |  |
| . Effect            | e date, if other than the date of filing:   |  |
| Note:               | tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pur the date inserted in this block does not meet the applicable statutory filing requirements, this date will it's effective date on the Department of State's records. | suant to 605,0207 (3<br>not be listed as the |
| f the red<br>b) The | rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t<br>Oth day after the record is filed.  | the earlier of:                              |
| Dated               | <del></del>   |  |
|                     |   |  |
|                     | Signature of a member or authorized representative of a member  |  |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00