

48000203609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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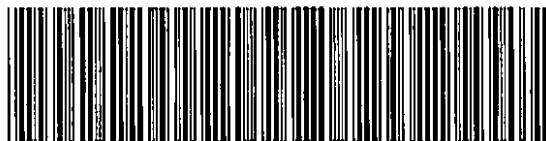
(Business Entity Name)

(Document Number)

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18 AUG 30 AM 8:44
SECRETARY OF STATE
DIVISION OF CORPORATIONS

N COOPER

SEP 05 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Uber 40 LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Emil Hakim

Name of Person

uber 40 LLC

Firm/Company

1744 Grand Rue De

Address

Casselberry, FL 32707

City/State and Zip Code

ubertaxi40@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emil Hakim

407

463-3730

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

MAILING ADDRESS:

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**

Uber 40 LLC

(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 08/23/2018 and assigned
Florida document number L18000203609.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Uber 40 LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1744 Grand Rue Dr

Casselberry, FL 32707

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 AUG 30 AM 8:44

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:

Name of New Registered Agent: Emil Hakim

New Registered Office Address: 1744 Grand Rue Dr
Enter Florida street address

Casselberry Florida 32707
City Zip Code

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 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>	<u>Type of Action</u>
AMGR	EMIL HAKIM EMIL HAKIM	1744 Grand Rue Dr Casselberry, FL 32707	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	iman Hakim	1744 Grand Rue Dr Casselberry, FL 32707	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 AUG 30 AM 8:44

SECRETARY OF STATE
DIVISION OF CORPORATIONS
FBI
18 AUG 30 AM 8:44

E. Effective date, if other than the date of filing: _____ (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.

Dated 08/27, 2018

[Signature]

Signature of a member or authorized representative of a member

Emil Hakim

Typed or printed name of signee