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2019 JUL 29 PH 12: 01

C. GOLDEN AUG - 6 2019

COVER LETTER

SUBJECT:	UPH ICON	OS KITCHEN INTERNACIO:	NAL, LLC	
SUBJECT.		Name of Limi	ted Liability Company	
The enclosed	d Articles of .	Amendment and fee(s) are subn	mitted for filing.	
Please return	ı all correspo	ndence concerning this matter t	to the following:	
		Javier Ramirez		
			Name of Person	
		USA Gestiones		
			Firm/Company	· · · -
		990 Biscayne Blvd, Ste 701		
			Address	
		Miami, FL 33132		
		info@usagestiones.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notific	cation)
For further is	nformation co	oncerning this matter, please ca	II:	
Javier Rami	гех		786 631-9816	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is	a check for th	ne following amount:		
■ \$25.00 F	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:

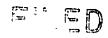
Registration Section Division of Corporations

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



UPH ICONOS KITCHEN INTERNACIONAL, LLC 2019 JUL 29 PH 12: N6 (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 $\frac{02/25/2019}{}$ Florida document number 1.19000053559 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: UPH & BLUE, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

_. Florida _

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	JULIO J MONTENEGRO	990 BISCAYNE BLVD, MIAMI, FL 33132	⊟ Add
	-		B Add
			Remove
			Change
			Add
			Remove
			□ Change
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ective date, if other than the	te date of filing: (optional) ust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.9
te: If the date inserted in this becament's effective date on the E	block does not meet the applicable statutory filing requirements, this date will not be listed
record specifies a delaye The 90th day after the rec	ed effective date, but not an effective time, at 12,01 a.m. on the earlie cord is filed.
ted 22 July	
	Jose ignacio londoño C

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00