

8/30/22, 7:39 PM

Division of Corporations

## Florida Department of State

**4900053559**

Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : V & A BUSINESS SOLUTION INC  
Account Number : I20160000021  
Phone : (954)865-6607  
Fax Number : (954)933-2634

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**UPH & BLUE, LLC**

Certificate of Status	0
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Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

T. LEMIEUX

SEP - 1 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: UPH & BLUE 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:

JOSE I. LONDONO CORREA

Name of Person

AMBR

Firm/Company

990 BISCAYNE BLVD STE 501-15

Address

MIAMI, FL 33132

City/State and Zip Code

uphblue19@gmail.com

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

For further information concerning this matter, please call:

JOSE I. LONDONO CORREA

315

394-6978

Name of Person

at ( )

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

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UPH &amp; BLUE 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 02/25/2019 and assigned Florida document number 119000053559.

This amendment is submitted to amend the following:

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

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:

1200 BRICKELL AVE UNIT 3120

(Principal office address MUST BE A STREET ADDRESS)

MIAMI FL 33131

Enter new mailing address, if applicable:

1700 BANKS RD SUITE 505H

(Mailing address MAY BE A POST OFFICE BOX)

MARGATE FL 33063

**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:

JOSE L. CORREA LONDONO

New Registered Office Address:

1200 BRICKELL AVE UNIT 3120

*Enter Florida street address*

MIAMI

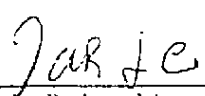
*City*

Florida 33131

*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 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>	<u>Type of Action</u>
AMBR	JOSE I. LONDONO CORREA	1200 BRICKELL AVE UNIT 3120	<input type="checkbox"/> Add
		MIAMI FL 33131	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: 08/25/2022 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

Dated AUGUST 30 2022

Signature of a member or authorized representative of a member

JOSE J. LONDONO CORREA

Typed or printed name of signee