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(Re	equestor's Name)	
(Ad	dress)	
(Ád	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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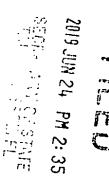
Office Use Only



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COVÈR LETTER

SUBJECT: UFS	.55 Prope	HIES LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Shatine	M Cannon Name of Person	
	•		
		Firm/Company	
	2003 G	Munador DR	K-4
	Coconut	Creek FL 3 City/State and Zip Code	3065
	Ting Me (COMMON @ MONTO	ication)
For further information co	ncerning this matter, please co	all:	
Tinci Con	NON	at (<u>443) 603</u>	
Name of	Person	Area Code Daytimo	: 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:

TO?

Registration Section Division of Corporations

> 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

UFS 55 Properties LLC	
	16
5-9-2019 5/10/20	14
The Articles of Organization for this Limited Liability Company were filed on and assigned and assigned	
The Articles of Organization for this Limited Liability Company were filed on 5-9-2019 and assigned Florida document number £/N 83-4706/50 L 9000/26 917 This amendment is submitted to amend the following:	
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:	
(Principal office address MUST BE A STREET ADDRESS)	+
The state of the s	-
7 000	-
2	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Ì
(Mailing address MAY BE A POST OFFICE BOX)	Ī
	-
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:	new
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	
provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and	ine
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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
monagel	Antonio Toscamo Ir	2003 Granada DR K4 Coconut Creek FL 33066	_ Add
			□ Remove
			🗆 Change
AMBR	Morty Robinson	12937 Pennell Pines Rd. Boynton Beach F2 3343	_ _ 2 Add 6
			□ Remove
			🗆 Change
			□ Add
			Remove
			_□ Change
			_□ Ađd
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			_□ Change
			_□ Add
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			_□ Change
			_ D Add
			_□ Remove
			☐ Change

). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
Note:	tive date, if other than the date of filing:
the re) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	IM lun
	Signature of a member or authorized representative of a member
	Shooting a M Cannon Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00