Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200001178713)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GOYENECHEA PROFESSIONAL SERVICES LLC

Account Number : 120190000078 Phone : (561)341-1582 : (561)264-6286 Fax Number

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

UNICORN LIFE LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help Y SULKEP APR 23 2020

(H20000117871 3)

COVER LETTER

TO:	Registration Section Division of Corpora	i itions	
SUBJ	ECT:	UNICORN LIFE LLC	
		Name of Limited Liability Company	
The er	iclosed Articles of Amer	indiment and fee(s) are submitted for filing.	
Picase	return all corresponden	ice concerning this matter to the following:	
	_	Pablo E Goyeneches	
		Name of Person	
		TuContador EnMiami.com LLC	
	_	Firm/Company	
	_	601 Heritage Drive, Suite 461	
	_	Address	
		Jupiter, Florida 33458	
	-	City/State and Zip Code	
		pgoyenechea@yahoo.com	
		E-mail address: (to be used for future annual report notification)	
ror tu	rther information conce	ming this matter, please call:	
	Pablo E Goye	meches 561 341-1582	
	Name of Pen	at () Area Code Daytime Telephone Nu	mber

Enclosed is a check for the following amount:

Malling Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

(4200001178713

(H 20000 1178713)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UNICORN LIF	ELLC			
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appear Lisbility Company)	s on our records.)		
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	10/01/2019	_ and assign	ed .
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company he	re:		
ULTRA ENGINEERING LLC				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the d	esignation "LLC" or the abbr	eviation "LLC	
Enter new principal offices address, if applicable:	221 W HALLA	NDALE BEACH BLVD		
(Principal office address MUST BE A STREET ADDRESS)	SUITE 312		7.0	~
[Principal affice dedress most be ASTREET ADDICESS]	HALLANDALE	E BEACH, FL 33009	7	120
			**************************************	\$PR
Enter new mailing address, if applicable:	221 W HALLA	NDALE BEACH BLVD		~ !>>
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 312			
Matting aguress MAT BE A 1 031 01 1 1CE BOAT	HALLANDAL	E BEACH, FL 33009		= 1
			<u> </u>	2 5 (
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our r	ecords, <u>enter the name</u>	of the new of	gistered
Name of New Registered Agent:	TUCONTADO	RENMIAMI.COM LLC		
New Registered Office Address:	601 HERITAG	GE DRIVE, SUITE 461		
New Neglisteres Office Francisco.	Enter Flo	rida street address	······	
	JUPITER	. Fiorida	33458	
	City	, , , 101140	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.

H 20000 117871 3

(H200001178713)

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each nerson being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Name	Address	Type of Action
VARGAS, ALVARO M	221 W HALLANDALE BEACH BLVD	BAdd
	SUITE 312	□Remove
	HALLANDALE BEACH, FL 33009	□ Change
FERRUZOLA GHERARDY, ADDA E.M.	221 W HALLANDALE BEACH BLVD	DAdd
	SUITE 312	CRemove
	HALLANDALE BEACH, FL 33009	☐ Change
VARGAS FERRUZOLA, ALVARO M	5519 JAMES RD	🗀 Add
	FORT BELVOIR, VA 22060	居Remove
		DChange
		[] Add
		□Remove
		Change
		DAdd
		□Remove
		□Change
		DAdd
		ORemove
		DChange
	VARGAS, ALVARO M FERRUZOLA GHERARDY, ADDA E.M	VARGAS. ALVARO M 221 W HALLANDALE BEACH, FL 33009 FERRUZOLA GHERARDY, ADDA E.M SUITE 312 HALLANDALE BEACH, FL 33009 VARGAS FERRUZOLA, ALVARO M 5519 JAMES RD FORT BELVOIR, VA 22060

(H200001178713

(H200001178713))

_	
_	
_	
_	
_	
_	
_	
_	
_	
an effe	ve date, if other than the date of filing: crive 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 605.0 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed mit's effective date on the Department of State's records.
record Lis file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after id.
nted_	April 17th 2020
	Signature of a member or sushortfed representative of a member

(H200001178713)