

L20000078802

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H24000241244 3)))



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

From:  
Account Name : JP GLOBAL BUSINESS  
Account Number : 120130000083  
Phone : (305)359-3700  
Fax Number : (786)217-1243

**\*\*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  
MODOTTATI LLC

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

RECEIVED

2024 JUL 16 PM 2:14

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
2024 JUL 16 AM 11:11  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MODOTTATI 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:

SONIA BOTERO  
Name of Person  
JP GLOBAL BUSINESS SOLUTIONS INC  
Firm Company  
1395 BRICKELL AVE STE 800  
Address  
MIAMI FL 33131  
City/State and Zip Code  
MASTER@JPGBUSINESS.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FANNY J OTTATI 305 359-3700  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount.

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

Mailing 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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

MODOTTATI LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**FILED**  
2024 JUL 16 AM 4:11  
CLERK OF CIRCUIT COURT  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/11/2020 and assigned  
Florida document number 120000078802.

This amendment is submitted to amend the following:

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

UNIKENET 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:

111 SW 3RD ST SUITE 301

(Principal office address MUST BE A STREET ADDRESS)

MIAMI FL 33130

Enter new mailing address, if applicable:

111 SW 3RD ST SUITE 301

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI FL 33130

**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*

Florida

*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 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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input 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"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

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FALLAHL'S SERVICE, LLC  
FALLAHL'S SERVICE, LLC

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

2024 JUL 16 AM 4:11  
3410 W. 10TH AVE. FLORIDA  
TALLAHASSEE

FILE

E. Effective date, if other than the date of filing: \_\_\_\_\_ (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 JULY 8th 2024

Signature of a member or authorized representative of a member

FANNY J OTTATI

Typed or printed name of signee