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C. GOLDEN SEP 22 2020

COVER LETTER

TO:	Registration S Division of Co			
SUBJEC	Uloud LL	С		
SUBJEC	I,	Name of Lim	ited Liability Company	
The encl	osed Articles o	of Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all corresp	oondence concerning this matter	to the following:	
		Fabiola Perlloni Rosso		
			Name of Person	,
		Uloud LLC		
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		7950 NE Bayshore Ct Apt	601	
		_	Address	
		Miami, FL, 33138		
			City/State and Zip Code	
		uloudteam@gmail.com		
		E-mail address: (to be used for future annual report no	titication)
For furth	ner information	concerning this matter, please c	all:	
Fabiola	Perlloni Rosso		787 201-8066	
	Name	of Person	Area Code Daytii	me Telephone Number
Enclosed	I is a check for	the following amount:		
≡ \$ 25.	00 Filing Fce	☐ \$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 Addr		Street Address:	ection
	Registration Division of	Corporations	Registration Solution of Co	
	P.O. Box 63	327	The Centre of	Tallahassee
	Tallahassee.	, FL 32314	2415 N. Monre	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Uloud LLC

2737 -4, Pil 3:52

(Name of the Lim	ited Liability Compan (A Florida Limited L	iy as it now appears o iability Company)	in our records.)
The Articles of Organization for this Limited Florida document number	Liability Company v	were filed on $\frac{7/15/2}{1}$	2020 and assigned
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liabil	lity company here	;
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	7950 NE Bayshore	: Ct Apt 601, Miami, FL. 33138
(Principal office address MUST BE A STRE	ET ADDRESS)		
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or	registered office a	ddress on our rece	ords, enter the name of the new register
agent and/or the new registered office addr	<u>ess nere</u> :		
Name of New Registered Agent:	Fabiola Perfloni		
New Registered Office Address:	7950 NE Baysho	ore Ct Apt 601	
		Enter Florida	i street address
	Miami	City	Florida 33138 Zip Code

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>	Address	Type of Action
AMBR	Federico A. Martino	7950 NE Bayshore Ct Apt 601, Miami, FL, 33138	= Add
			Remove
			□Add
			□Remove
			□Change
			í]Add
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			□Remove
			□Change

Effective date, if other than the date of filing: [(optional)] (an effective date is fisted: the date must be specify and cannot be prior to date of filing or more than 90 days after filing) Pursuant to 605.020 More. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. The every 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 dis filed. Dated July, 30th 2020 Signature of a biember or authorized representative of a member	.		·-·	•	
Effective date, if other than the date of filing:					
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Slavi	July, 30th	2020			
Signature of a member or authorized representative of a member	Jaicu	<u> </u>	·		
Signature of a member or authorized representative of a member	\mathcal{G}	Marin		 ,	
	Sig	nature of a j nember or a	ithorized representativ	e of a member	

Filing Fee: \$25.00