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Special Instructions to	Filing Officer:	
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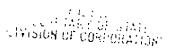
COVER LETTER

TO: Registration Section

Division of Cor	porations		
URDISPAT	TCH LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
	INCFILE.COM LLC		
		Firm/Company	
	17350 STATE HWY 249	STE 220	
		Address	
	HOUSTON, TX 77064		
		City/State and Zip Code	
	EFILE1234@INCFILE.CO		
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
LOVETTE DOBSON		888 462-3453	
Name o	f Person		ne Telephone Number
Enclosed is a check for th	ne 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 Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Se Division of Co The Centre of 7 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



URDISPATCH LLC

21 MAR 16 PM 4: 09

(Name of the Limi	ted Liability Company as it now appears on our reco (A Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited L Florida document number L21000015315	iability Company were filed on 01/05/2021	and assigned
This amendment is submitted to amend the foll	lowing:	
A. If amending name, enter the new name o	of the limited liability company here:	
The new name must be distinguishable and contain the v	words "Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	
Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	
B. If amending the registered agent and/or in agent and/or the new registered office addre	registered office address on our records, <u>ent</u> ess here:	er the name of the new regist
Name of New Registered Agent:	MARCO FABIO PINTO ROCABADO	
New Registered Office Address:	Enter Florida street add	lress
		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.

Macy Fapio Linto Metabasio f 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>	Name	Address	21 MAR 16	Ph 4: 09
AMBR	MARCO FABIO PINTO ROCABADO	14415 SW 88TH ST APT G-406		□Add
		MIAMI, FL 33186		□Remove
			- ,	≘ Change
AMBR	MARIA JUANITA ROCABADO LEIGUE	14415 SW 88TH ST APT G-406		□ Add
		MIAMI, FL 33186		□Remove
				🗏 Change
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Effective date, if other than the date in effective date is listed, the date must be Note: If the date inserted in this bloc document's effective date on the Dep	especific and cannot be prior to date of filing or mo edoes not meet the applicable statutory filing	(optional) ore than 90 days after filing.) Pursuant to 605.0207 or grequirements, this date will not be listed as to
e record specifies a delayed effective ord is filed.	ate, but not an effective time, at 12:01 a.m. o	on the earlier of: (b) The 90th day after the
Dated	2021	
Mana	Fabro Linto Act affinature of a member or authorized representative	rado- of a member
31	mature of a mermoer or authorized representative	or a memocr
MARCO FABIO PINTO I	OCABADO Typed or printed name of signee	