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## Incorporating Services, Ltd.

incserv°

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

### ORDER FORM

Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051

FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 7/10/2023

PRIORITY Regular Approval

OUR REF\_#\_(Order\_ID#)] 1161982

ORDER ENTITY UGP-6743 NW 2ND CT LLC

PLEASE PERFORM THE FOLLOWIN	G SERVICES:
UGP-6743 NW 2ND CT LLC (FL)	

File the attached amendment

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MA.	TEC									
ITV,	LJ	`• ——	<del></del>	 		 	 	 	 	

\$25.00 Authorized

# RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, July 10, 2023 Page 1 of 1

# **COVER LETTER**

TO: Registration So Division of Cor			
	3 NW 2nd CT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	unitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Thomas Bayles		
		Name of Person	
	Urban Growth Properties		
		Firm/Company	
	382 NE 191st PMB 78674		
		Address	<del></del>
	Miami FL 33179		
		City/State and Zip Code	
	thomas@urbangrowthprope	erties.com to be used for future annual report noti	75 A
For further information a	concerning this matter, please c	•	meation)
	the state of the s		
Thomas Bayles		626 636-5061 at ()	te Telephone Number
Name c	of Person	Area Code Daytim	te Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addre</u> Registration		Street Address:	etion
Division of C		Registration Se Division of Cor	
P.O. Box 632		The Centre of T	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 J. L 10 AM II: 04

UGP-6743 NW 2nd CT LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on June 7 2021 and assigned Florida document number L21000265116 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 "LLC." Enter new principal offices address, if applicable: 6743 NW 2nd CT (Principal office address MUST BE A STREET ADDRESS) Miami FL 33150 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

#### 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Thomas Bayles	382 NE 191st St PMB 78674	🗀 Add
		Miami Florida 33179-3899	■Remove
			Change
MGR	Gamlet Arutyunyan	382 NE 191st St PMB 78674	Add
		Miami Florida 33179-3899	□ Remove
			Change
			Add
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Sective date, if other the neffective date is listed, the term of the date inserted in cument's effective date of	date must be specific a this block does no	and cannot be prior to out of the applicable			after filing.) Pursua		
ecord specifies a delayed is filed.	effective date, but	not an effective time	e, at 12:01 a.n	1. on the earlier o	f: (b) The 90th	day after	the
ed July 8		2023	•	OH,			

Filing Fee: \$25.00