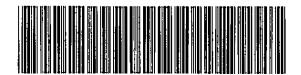
# 422000141706

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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T. MATTHEWS

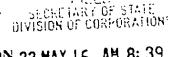
### **COVER LETTER**

TO: Registration Section

Division of Cor	porations				
CUBICCT.	ULTRAG	LOBAL LLC			
SUBJECT: Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Sonia Becerra			
		Name of Person			
		Swyft Filings			
		Firm/Company			
		3 Greenway Plaza #13	20		
		Address			
		Houston, TX 77046	5		
		City/State and Zip Code			
	jose	.monje@ultraglobal	trade		
	E-mail address: (	(to be used for future annual r	report notification)		
For further information of	oncerning this matter, please c	all:			
Sonia B	ecerra	at (877)	777-0450		
Name o	f Person	Area Code	Daytime Telephone Number		
Enclosed is a check for the	he following amount:				
№ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl	Certificate of Status &		
<u>Mailing Addres</u> Registration		<u>Street Ad</u> Registra	Idress: ttion Section		
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT SECRETARY OF STATE DIVISION OF CORPORATIONS



### ARTICLES OF ORGANIZATION 22 HAY 16 AM 8: 39 OF

ULTRAGLO	BALILLO		
(Name of the Limited Liability C (A Florida Lii	Tompany as it now appe mited Liabibty Company	ars on our records.)	
The Articles of Organization for this Limited Liability Com	npany were filed on _	03/22/2022	and assigned
Florida document numberL22000141706			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company	here:	
The new name must be distinguishable and contain the words "Limited	H.Liability Company," the	designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			Eal
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	tlice address on our	records, enter the I	name of the new registe
Name of New Registered Agent:			<u> </u>
New Registered Office Address:			
Hen inglated office rights.	Enter F	lorida street address	
		, Florid:	a
	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.

X 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	JOSE M BUTRON	2025 NW 102ND ST STE 110	🗀 Add
		DORAL, FL 33172	Remove
			Change
AMBR	Jose Monje	2025 NW 102ND AVE STE 110	.X√dd
		DORAL, FL 33172	□ Remove
			Change
			Add
			□ Change
			□ Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			[] Change

. If amending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
Note: If the date	fother than the date of filing:
the record specifies cord is filed.	a delayed effective date, but not an effective time, at 18:01 a.m. on the earlier of: (b) The 90th day after the
Dated	MAY . 2022
	Signature of a member or authorized epresentative of a member

Filing Fee: \$25.00