L23000014784

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

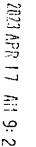
Office Use Only



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04/17/23--01009--028 **25.00





COVER LETTER

TO: Registration S Division of Co		
ULTRA FI	VELLC	
SUBJECT:		
	Name of Lim	nited Liability Company
The enclosed Articles of	Amendment and fee(s) are sub	omitted for tiling.
Please return all correspondence	ondence concerning this matter	to the following:
	BIANCA SONNINO	
		Name of Person
	SB ACCOUNTING	
		Firm/Company
	1370 WASHINGTON AVE	E SUITE 302
		Address
	MIAMI BEACH FL 33139)
	BSONNINO@SBACCOUN	City/State and Zip Code
	E-mail address: ((to be used for future annual report notification) all:
For further information of	concerning this matter, please c	rall:
BIANCA SONNINO		303 3700717
		at () Area Code Daytime Telephone Number = 101
Name (of Person	at () Area Code Daytime Telephone Number 99
Enclosed is a check for t	he following amount:	
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration		Street Address: Registration Section
Division of C		Division of Corporations
P.O. Box 631	<u> </u>	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ULTRA FIVE LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our recorded Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Comparison document number $\frac{L23000014784}{L}$	any were filed on	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited I.	iability Company," the designation "LLC	"In or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	ra
		- Co
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		المساور والما
		22 ATE
3. If amending the registered agent and/or registered offigent and/or the new registered office address here:	ce address on our records, <u>enter</u>	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		lorida
	City	zip Coae

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>	Type of Action
MRG	MICHELLE PICCIOLO	1370 WASHINGTON AVE STE 302	
			Remove
-			
			□Remove
			□Change
			∴ ÈNdd
			Remove
			;
			### Change 9: 22 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Chanor

2. If amending any other information, enter change(s) here: (Attach additional sheets,	if necessary.)
· 	
**	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 da Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	(optional) lys after filing.) Pursuant to 605.0207 (lnts, this date will not be listed as th
document seriective date on the Bepartment of State s records.	
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies ford is filed.	r of: (b) The 90th day after the
04/10/23	2023
Dated	7023 APR 1
Signature of a member or authorized representative of a member ALBERTO SERMONETA	

Typed or printed name of signee