

L23000094509

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : INC AUTHORITY, LLC
Account Number : I20240000004
Phone : (775) 329-7721
Fax Number : (775) 376-9207

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: kellybatache@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
DIVISION, LLC

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K. SALY

JUL 23 2024

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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JUL 23 2024

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

UVISION, 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 02/22/23 and assigned
Florida document number L23000094509

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SERVICES BY UVISION, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC," or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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:

Inc Authority RA

New Registered Office Address:

390 North Orange Ave., Ste 2300-N

(Enter Florida street address)

Orlando

Florida 32801

(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. On this document being filed to us, only reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature)
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>	<u>Type of Action</u>
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D. If amending any other information, enter change(s) here: *(attach additional sheets, if necessary)*

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F. Effective date, if other than the date of filing: N/A (optional)

(b) If an effective date is listed, the claim must be in effect on, and cannot be prior to, date of filing or date (less 120 days after filing) if a provisional filing is made prior to 3/1/2017. (3) If no effective date is listed, the claim must be in effect on the date of filing.

Notes: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Date: July 21st 2024

Kelly Burton
Signature of a member or authorized representative of a company

Kathy Barabara

1. *Hydrolysis of polyacrylonitrile* by H_2O and H_2SO_4