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Cover Letter:
Charles Ancona
407-455-3579
125 E Pine St #1116
Orlando , FL 32801

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## **COVER LETTER**

TO:

Registration Section

Div	ision of Corp	porations				
	UBIFROCH	HLLC				
SUBJECT:		Name of Lim	ited Liability Company		<del></del>	
The enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspor	ndence concerning this matter	to the following:			
		CHARLES ANCONA				
			Name of Person			
		UBREAKIFIX				
			Firm/Company			
		696 E ALTAMONTE DR	RIVE #1050			
		<del></del>	Address			, , , , ,
		ALTAMONTE SPRINGS	S. FL 32701			다 23 - :
			City/State and Zip Co	жle	<del>-</del>	<del>ن</del> ن
		ROSEYGUEX@GMAIL.				
		E-mail address: (	to be used for future and	ual report notific	cation)	- ´ Č
For further i	nformation co	oncerning this matter, please c	all:			ြင့္ပြဲ မွာ
CHARLES	ANCONA		407	4553579		
	Name of	Person	Area Code	Daytime	Telephone Number	<del></del>
Enclosed is	i check for th	e following amount:				
■ \$25.00 I	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing F Certified Copy tadditional copy i	<i>'</i>	Certified	e of Status &
	iling Address gistration S			t Address: stration Sect	tion	
Division of Corporations			Divi			
P.0	). Box 632	7	The	Centre of Ta	llahassee	
Ta	llahassee, F	FL 32314	2415	10		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UBIFROCHLLC		
(Name of the Limited Lia (A Flo	hility Company as it now appears on o rida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabilit	y Company were filed on May 12	2, 2023 and assigned
Florida document number L23000236311	·	
This amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the	imited liability company here:	
The new name must be distinguishable and contain the words	r s mar c	of the state of th
The new name must be distinguishable and contain the words	Limited Liability Company, and designa	ition LLC of the appreviation (LLC.
Enter new principal offices address, if applicable:	<del> </del>	
(Principal office address MUST BE A STREET AL	DRESS)	<u></u>
		: ,
		- ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX		1 - 1
B. If amending the registered agent and/or regist agent and/or the new registered office address her		ds, <u>enter the name of the new registere</u>
Name of New Registered Agent: Re	DSELENE GUEX	

## New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

**ORLANDO** 

1801 N ECONLOCKHATCHEE TRL #678080

City

ROSELENE GUEX

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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
MGR	CHARLES J ANCONA JR.	125 E PINE ST #1116	□Add
		ORLANDO, FL 32801	• Remove
			□Change
MGR	ROSELENE GUEX	1801 N ECONLOCKHATCHEE TRL #678080	
		ORLANDO, FL 32867	□Remove
			□ Change
MGR	CHRISTIAN GUEX	1801 N ECONLOCKHATCHEE TRL #678080	• Add
		ORLANDO, FL 32867	□Remove
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-	Charles Ancon	^a Signatur	re of a mem	ber or autho	orized repre	sentative of	a member			A : 35

Filing Fee: \$25.00