Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000192458 3)))



H230001924583ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: INFANTE MULTI SERVICES INC

Account Number : I20220000173

Phone

: (786)342-4106 : (786)342-4106

Fax Number

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

	-	
Emai	1	Address:

cunbiz.org/scripts/efilcovr.exe

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **UPHT CONSTRUCTION LLC**

Certificate of Status	O
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Page: 3 of 6

## 2023-05-25 16:49:38 GMT COVER LETTER

13055036912

From: Infante Multi

Registration Section TO: Division of Corporations UP RT CONSTRUCTION LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: **HUMBERTO TERAN** Name of Person Firm/Company 1951 NW SOUTH RIVER DR 613 Address MIAMI, FL 33125 City/State and Zip Code TERANHUMBERTO@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **HUMBERTO TERAN** 305 824-6175

Enclosed is a check for the following amount:

Name of Person

目 \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

Area Code

☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Daytime Telephone Number

of a State of the Control of the Con

## ARTICLES OF AMENDMENT TO

ARTICLES OF OF	
OF	
UP HT CONSTRUCTION LLC	
(Name of the Limited Liability Company	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company with Florida document number 1.23000252005	vere filed on 05/23/2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
_	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	20:
7,110,001	12)
iter new mailing address, if applicable:	
failing address MAY BE A POST OFFICE BOX)	
	<u></u>
If amending the registered agent and/or registered office a	iddress on our records, enter the name of the new regist
ent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	Charles III
	Enter Ftorida street, address
	, Florida
	City Zip Code

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

0:	Page: 5 of 6	2023-05-25 16.49:38 GMT	13055036912	From: Infante Mu
If amend	ing Authorized Person(s) author	ized to manage, enter the title, name, a	nd address of each person be	From: Infante Mi
MCP =				विद्याणिक
<u>Title</u> AMBR	<u>Name</u> HUMBERTO TERAN	<u>Address</u> 1951 NW SOUTH RIVER DR 6	<u>Type of</u> 13 MIAMI, FL 33125	Action (S)
	Tombacter was			
			□Rei	nove
			Ch	ange
				id
			□R	emove
				Change
				Add
				Remove
				Change
				lAdd
				]Remove
		<u></u>	[	□Change
	<del></del>			□Add
				□Remove
				Change
<u></u>		<del></del>		_ 🗆 Add

□ Remove

	Page: 6 of 6	2023-05-25 16:49:38 GMT	13055036912	From: Infante Mult
			. I I as if a summer i	ानामान्यास्त्रान्त्रास्त्रान्त्रास्त्रान्त्रास्त्रा
D. If amendir	ng any other intermati	on, enter change(s) here: <i>(Attach additio</i>	onal sheets, if necessary.)	ुः सम्बद्धाः
				<del></del>
				i
	<del></del>			
				<del></del>
			12/12/12/1	<del></del>
			,	
<u></u>				<del></del>
				··
	·			
	<u> </u>			<del></del>
E. Effective date,	if other than the dat	e of filing:	(optional)	(04 0207 (2)/5)
Note: If the date	e inserted in this block	specific and cannot be prior to date of filing or does not meet the applicable statutory fil	more than 90 days after filing.) Pursi ing requirements, this date will r	not be listed as the
document's effec	ctive date on the Depar	tment of State's records.		
Y.C		65 41 41 410 01		1 1
record is filed.	s a delayed effective dat	ie, but not an effective time, at 12:01 a.m	a. on the eartier of: (b) I he 90t	n day after the
	, 1			
Dated 05/	75/2023			
		10//		
·	C lan			<del></del>
	Sign	ature of a member or authorized representati	ive of a member	
		Humber To Ten	<i>ل</i> ام	
<del></del>	•	Typed or printed name of signee		

Filing Fee: \$25.00