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(shown below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number : (850)617-6383

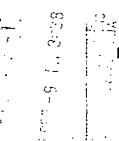
From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future\_3 annual report mailings. Enter only one email address please.\*\*  $\stackrel{\sim}{=}$   $\stackrel{\sim}{\sim}$ 

Email Address:\_\_\_\_\_



## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **UK INVEST LLC**

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To: 18506176383

Page 2/4

Fax: 8134365206

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF

(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 09/03/24 and assigned Florida document number L24000383669

This amendment is submitted to amend the following:

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

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)

FORT LAUDERDALE, FL 33309

,			<b></b>
B. If amending the registered agent and/or registered	office address on our records, <u>enter t</u>	ie name of the new	registered
agent and/or the new registered office address here:		4 SEP	
Name of New Registered Agent:		- 9	
New Registered Office Address:		Pil	<u> </u>
	Enter Florida street address	2:	
	, Flor	ida	
	City	Zip Code	

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

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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.

3833 POWERLINE RD SUITE 201

FORT LAUDERDALE, FL 33309

9/9/2024 12:40:28 PUT -

Tc: 18506176383

Page: 3/4

Fax: 8134365206

\_\_ □Change

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
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			□Remove
			[]Change
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To: 18506176383

D. If amending any	other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: If the date i	other than the date of filing:
If the record specifies a record is filed.	i delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)—The 90th day after the
Dated September	9 2024
	Signature 6f a member or authorized representative of a member
	arguature of a memore of ananomeo representative of a memori
	Nat Smith  Typed or printed name of signee