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(Re	equestor's Name)			
(Ad	ldress)			
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: UVM Investors 2, LLC Name of Foreign Limited Liability Company	
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jared Brunnabend	
Name of Person	
C/o Cynergy Property Management	
Firm/Company	
8181 NW 154th Street, Suite 260	
Address	
Miami Lakes, FL 33016	
City/State and Zip Code	JUN 2:
jared@bayshoreinv.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Jared Brunnabend 917 805-5043	3
Name of Person Area Code & Daytime Telepho	
STREET/COURIER ADDRESS: Registration Section Registration Section Section Orivision of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32301	tion porations
Certificate of Status Certified Copy Ce	Filing Fee, ertificate of Status & ertified Copy

CR2E055 (9/15)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	s on the records of the Florida Department	of
State: UVM Investors 2, LLC		
Enter new principal office address, if applicable:	C/o Cynergy Property Mana	gement
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	8181 NW 154th Street, Suite	≥ 260
	Miami Lakes, FL 33016	
Enter new mailing address, if applicable:	C/o Cynergy Property Mana	gement
(Mailing address MAY BE A POST OFFICE BOX)	8181 NW 154th Street, Suite	∋ 260
	Miami Lakes, FL 33016	
2. The Florida document number of this limited lia	ability company is: M16000001493	
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 02/	/23/2016	SE SE
SECTION II (5-9 complete only the applicable		
5. New name of the limited liability company:		
(mus	st contain Limited Liability Company, L	
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.	maging members adopting the alternate nan	Florida and attach a ne. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office a		name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street Ad	dross
	, Floric	da
	City	Zip Code
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regis document is being filed to merely reflect a change liability company has been notified in writing of the	ent and agree to act in this capacity. I further and complete performance of my duties, a stered agent as provided for in Chapter 605 in the registered office address, I hereby c	nd I am familiar with , F.S. Or, if this

<u> Γitle/ Capacity</u>	<u>Name</u>	Address Type of Act
MGR	Jared Brunnabend	8181 NW 154th ST. #260, Miami Lakes, FL 33016
·		3301 NE 1st Ave. Apt. 1604, Miami, FL 33137
MGR Jose Tello	Jose Tello	8181 NW 154th ST. #260, Miami Lakes, FL 33016
		3301 NE 1st Ave. Apt. 1604, Miami, FL 33137
		五字 費Add
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	E CONTRACTOR OF CHANGE	
	Remo	
	Add	
		Rem

Filing Fee: \$25.00

Typed or printed name of signee