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.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: LAMADRID FINANCIAL SERVICES CORP

Account Number : I20200000059

Phone

: (954)727-9771

Fax Number

: (954)727-9773

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

Email Address: <u>Qlonom</u>

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN URBAN DEVELOPER GROUP LLC

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M. SOLOMON

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Tallahassec, FL 32314

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COVER LETTER

TO:	Registration Sec Division of Corp	tion orations		
	URBAN DE	VELOPER GROUP LLC		
SUBJE	CT:	Name of Limite	d Liability Company	
		and fee(s) are subm	ived for filing.	
		Amendment and fee(s) are subm		
Please	return all correspor	ndence concerning this matter to	die ione was.	
		RAUL MARTINEZ		
			Name of Person	 -
		URBAN DEVELOPER GR	OUP LLC	
			Firm/Company	
		392 CARRINGTON DRIV	E	, ca
			Address	1922 JUL - 7 AA II: 49
		WESTON, FL 33326	_	
			City/State and Zip Code	A;
		raul@urbandeveloper.us	o be used for future annual report notifica	ition)
Can A	-thes information o	concerning this matter, please or		# .
		concerning in a messay, Fre	954 477-0411	
KAUI	L MARTINEZ	of Person	at ()	elephone Number
	Manie	7 1 612011		
Enclo	sed is a check for t	the following amount:		
	25.00 Fiting Fee	■ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre Registration Division of P.O. Box 63	Section Corporations 27	Street Address: Registration Sect Division of Corp The Centre of Ta	orations

Tallahassee, FL 32303

< H 220001322313> ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

URBAN DEVELOPER GROUP L	LC led Liability Comp (A Floride Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited L Florida document number M21000010369			and assigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name of	of the limited lia	bility company here:		
N/A			1 1 1 1 1 1 C 1	_
N/A The new name must be distinguishable and contain the v	words "Limited Liab	oility Company," the designation "LLC" of	r the abbreviation C.C.C.	
Enter new principal offices address, if appli	cable:	N/A		-
(Principal office address MUST BE A STREI	ET ADDRESS)		3822	_
				_
Enter new mailing address, if applicable:				– :
(Mailing address MAY BE A POST OFFICE	E BOX)			; ;
			-	_
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office ess here:	e address on our records, <u>enter th</u>	e name of the new regist	<u>tere</u>
Name of New Registered Agent:	N/A			_
New Registered Office Address:		Enter Florida street address		_
		, Flor		
		Cîry	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. 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

<4220002322313>

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>	Name	Address	Type of Action
MEM	BUNNEY LEONEL	16565 NE 26TH AVE APT C3	
		NORTH MIAMI BEACH, FL 33160	≅Remove
			Change
MGR	RAUL MARTINEZ CONDE	REPUBLICA DE CUBA 1414	\exists Add
		PROVIDENCIA, SANTIAGO, CHILE	□Remove
			Change
MGR	ESTELA C URZUA VILLARROE	392 CARRINGTON DRIVE	🗃 Add
		WESTON, FL 33326	□Remove
			□ Charige
MGR	MAITE Y DE LEON MONTANEZ	2142 ENSENADA TERRACE	≅Add
		WESTON, FL 33327	
			□Change
			□ Remove
			□Change

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N/A	•
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07/07/2022	
ctive date, if other than the date of filing:	or more than 90 days after filing a Pursuant to 605 0
e; If the date inserted in this block does not meet the applicable statutory t	filing requirements, this date will not be listed
iment's effective date on the Department of State's records.	
ord specifies a delayed effective date, but not an effective time, at 12:01 a.	m. on the earlier of: (b) The 90th day after the
filed.	
ed,,	
12 110 1	
Paul Marting 3 Signature of a member or authorized represents	
Signature of a member or authorized represents	itive of a member
O.B. Maraille O. a. Marine at C. Daniel and C. Presser.	

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Filing Fee: \$25.00