# 500004266

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
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Office Use Only



05/28/25--01012--007 \*\*25.00

#### **COVER LETTER**

| Division of Cor            |   |  | •   |  |  |  |  |  |  |  |  |  |
|----------------------------|---|--|---|--|--|--|--|--|--|--|--|--|
| UBR Archi<br>SUBJECT: \$   |   | en de la companya de<br>La companya de la co |   |  |  |  |  |  |  |  |  |  |
| 30BJECT. 4                 | Name of Lim                                     | ited Liability Company   |   |  |  |  |  |  |  |  |  |  |
|                            |   |  |   |  |  |  |  |  |  |  |  |  |
| The enclosed Articles of   | Amendment and fee(s) are sub                    | mitted for filing.   |   |  |  |  |  |  |  |  |  |  |
| Please return all correspo | ondence concerning this matter                  | to the following:  |   |  |  |  |  |  |  |  |  |  |
|                            | Maxine Lambert                                  |  |   |  |  |  |  |  |  |  |  |  |
|                            |   | Name of Person   | <del></del> -   |  |  |  |  |  |  |  |  |  |
|                            | UBR Architect LLC                               |  |   |  |  |  |  |  |  |  |  |  |
|                            | Firm/Company                                    |  |   |  |  |  |  |  |  |  |  |  |
|                            | 2031 Harrison St, Suite 29                      | •  |   |  |  |  |  |  |  |  |  |  |
|                            |   | Address  | · <u> </u>  |  |  |  |  |  |  |  |  |  |
|                            | Hollywood FL 33020                              |  |   |  |  |  |  |  |  |  |  |  |
|                            |   | City/State and Zip Code  |   |  |  |  |  |  |  |  |  |  |
|                            | contact@ubrgroup.com                            |  | ·* ·  |  |  |  |  |  |  |  |  |  |
|                            |   | to be used for future annual report not  | iffication)   |  |  |  |  |  |  |  |  |  |
| For further information c  | oncerning this matter, please c                 | all:   |   |  |  |  |  |  |  |  |  |  |
| Julie Lambert              |   | 954 997-9996<br>at ( )   |   |  |  |  |  |  |  |  |  |  |
| Name o                     | f Person  |  | ne Telephone Number   |  |  |  |  |  |  |  |  |  |
| Enclosed is a check for th | he following amount:                            |  |   |  |  |  |  |  |  |  |  |  |
| ■ \$25.00 Filing Fee       | ☐ \$30.00 Filing Fee &<br>Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  | ☐ \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

**UBR Architects LLC** 

2025 MAY 28 AH 9: 28

(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                 | 03/24/2025  | and assigned                      |
|--|-------------------------------|---|-----------------------------------|
| Florida document number M25000004266   |                               |   |                                   |
| This amendment is submitted to amend the following:  |                               |   |                                   |
| A. If amending name, enter the new name of the limited liab  | ility company                 | <u>r here</u> :   |                                   |
| UBR Architect LLC  |                               |   |                                   |
| The new name must be distinguishable and contain the words "Limited Liabil   | ity Company," tl              | he designation "LLC" or the abbrev                            | iation "L.L.C."                   |
| Enter new principal offices address, if applicable:  |                               | ·   | <del></del>                       |
| (Principal office address MUST BE A STREET ADDRESS)  | /                             |   | <u>.</u>                          |
|  |                               |   |                                   |
|  |                               |   |                                   |
| Enter new mailing address, if applicable:  |                               |   | <u></u>                           |
| (Mailing address MAY BE A POST OFFICE BOX)   |                               |   |                                   |
|  |                               |   | <u> </u>                          |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  | address on ou                 | er records, <u>enter the name o</u>                           | the new registered                |
| Name of New Registered Agent:  |                               |   |                                   |
| New Registered Office Address:   | <del></del>                   |   |                                   |
|  | Enter .                       | Florida street address  |                                   |
| <del> </del>   | City                          | , Florida   | Zin Cods                          |
| New Registered Agent's Signature, if changing Registered Agent:  | Cnj                           | •   | εφ Coue                           |
|  |                               | 1.0   |                                   |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change. | performance<br>provided for i | e of my duties, and I am fam<br>in Chapter 605, F.S. Or, if t | iliar with and<br>his document is |
|  |                               |   |                                   |

If Changing Registered Agent. Signature of New Registered Agent

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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| `an effe<br><del>\ote:</del> | ve date, if other than the date of filing:  (optional)  retive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records. |
| recore<br>d is file          | I 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 d.  |
| ated_                        | 05/21/2025   |
|                              | <del></del>  |



## State of Belaware

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 898 DOVER, DELAWARE 19903

90006582 UBR GROUP LLC 4811 JACKSON STREET HOLLYWOOD, FL 33021 05-14-2025

| DESCRIPTION  |                                       | AMOUNT                                  |
|--|---------------------------------------|---|
| 10079738 - UBR ARCHITECT LLC<br>0240Y Amendment Name           |                                       |   |
| ozaci Amerianen Name   | Amendment Fee                         | \$180.00                                |
|  | Court Municipality Fee, Dover         | \$40.00                                 |
|  | Expedite Fee, 24 Hour                 | \$100.00                                |
| 10079738 - UBR ARCHITECT LLC<br>8100 Certified Copy - 1 Copies | Certification Fee                     | \$50.00                                 |
|  | , , , , , , , , , , , , , , , , , , , | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 10079738 - UBR ARCHITECT LLC Entity Status - Short Form        |                                       |   |
| Entity Status - Short Form                                     | Certification Fee                     | \$50.00                                 |
|  | Expedite Fee, 24 Hour                 | \$40.00                                 |
|  | TOTAL CHARGES<br>TOTAL PAYMENTS       | \$460.00<br>\$460.00                    |
|  | BALANCE                               | \$0.00                                  |



Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE

STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND

CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "UBR ARCHITECTS

LLC", CHANGING ITS NAME FROM "UBR ARCHITECTS LLC" TO "UBR

ARCHITECT LLC", FILED IN THIS OFFICE ON THE THIRTEENTH DAY OF

MAY, A.D. 2025, AT 8:56 O'CLOCK A.M.

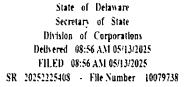


Charuni Patibando-Sanchez, Secretary of State

C. G. Sanchez

Authentication: 203689095

Date: 05-14-25



## STATE OF DELAWARE CERTIFICATE OF AMENDMENT OF CERTIFICATE OF FORMATION

The undersigned authorized person, desiring to amend the limited liability company formation pursuant to Section 18-202 of the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

| 1.          | The name of the limited liability company is UBR Architects LLC                        |
|-------------|--|
| 2.<br>follo | The Certificate of Formation of the limited liability company is hereby amended as ws: |
|             | We need to change the name of the limited liability by UBR Architect LLC               |
|             |  |
|             |  |
|             |  |
|             | - Aller A  |
|             | By:Authorized Person   |
|             | Name: Lambert Maxine   |
|             | Print or Type  |

Page 1

## Delaware The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE

OF DELAWARE, DO HEREBY CERTIFY "UBR ARCHITECT LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE FOURTEENTH DAY OF MAY, A.D. 2025.

Charuni Patibanda-Sanchez, Secretary of State
Authentication: 203689096

C. G. Sanchez

Date: 05-14-25



## **Division of Corporations Survey**

401 Federal Street, Suite 4 Dover, DE 19901

Fax: 302-739-7219

On a scale of 1 (unacceptable) to 10 (outstanding), please rate the following questions.

| 1. | How w                 |                    |                       | rate         | the                 | ove                  | rall o                 | quali                   | ty of        | fservi              | ce prov                     | ided l      | by the  | e Divis | sion c | of          |             |
|----|-----------------------|--------------------|-----------------------|--------------|---------------------|----------------------|------------------------|-------------------------|--------------|---------------------|-----------------------------|-------------|---------|---------|--------|-------------|-------------|
|    | 1                     |                    | 3                     | 4            | 5                   | 6                    | 7                      | 8                       | 9            | 10                  | NA                          |             |         |         |        |             |             |
| 2. | How w                 | vould<br>2         | you<br>3              | rate<br>4    | the<br>5            | <u>con</u><br>6      | <mark>veni</mark><br>7 | ence<br>8               | e of o       | our se<br>10        | rvices?<br>NA               |             |         |         |        |             |             |
| 3. | How w                 | vould<br>2         |                       | rate<br>4    | the<br>5            |                      | nptr<br>7              | 1 <b>ess</b><br>8       | of s         | ervice<br>10        | provide<br>NA               | ed?         |         |         |        |             |             |
| 4. | How w                 |                    | you<br>3              | rate<br>4    |                     | <u>acc</u> 6         |                        |                         | of t         | he Div<br>10        | vision o                    | f Corp      | oratio  | ons s   | taff?  |             |             |
| 5. | How w                 | vould<br>2         | you<br>3              | rate<br>4    | the<br>5            | <u>trair</u><br>6    | ning<br>7              | you<br>8                | rece<br>9    | ived f<br>10        | rom the<br>NA               | Divis       | ion o   | f Corp  | oorati | ons sta     | aff?        |
| 6. |                       |                    | eas                   | y to i       | read                | and                  | help                   |                         |              |                     | ived fro<br>elines, f<br>NA |             |         |         |        |             | ns?         |
| 7. | Were conce            |                    | ion c                 | of Co        |                     | ation                |                        |                         |              | <u>tive a</u><br>10 | nd helr<br>NA               | oful re     | elative | e to yo | our co | ommen       | ts and      |
| 8. | Did Di                | visior<br>2        |                       | Corp         | orat                | ions                 | staff                  |                         | lay <b>j</b> |                     | sional                      | ism 8       | l cou   | rtesy   | ?      |             |             |
| 9. | Are Di<br>1           | visio<br>2         | n of (                | Corp<br>4    | orat<br>5           | ions<br>6            |                        |                         |              | dgeab<br>10         |                             |             |         |         |        |             |             |
|    |                       |                    |                       |              |                     |                      |                        |                         |              |                     | ents wi<br>rvice) t         |             |         |         |        |             |             |
|    | Comm                  | ents:              | . <u></u>             |              |                     | <del></del>          |                        |                         |              |                     |                             | <del></del> |         |         |        |             | <del></del> |
|    |                       |                    |                       |              |                     |                      |                        |                         |              |                     |                             |             |         |         | _      | <del></del> |             |
| Co | mpany<br><b>you w</b> | nam<br><b>ould</b> | e an<br>I <b>pr</b> e | d co<br>efer | ntac<br>, <b>yo</b> | t info<br><b>u m</b> | orma<br><b>ay</b> t    | ition:<br>t <b>ak</b> e | thi          | s sui               | vey o                       | nline       | at      |         |        |             | <del></del> |

https://surveymonkey.com/r/corporationssurvey