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## COVER LETTER

TO: Amendment Section Division of Corporations

## NAME OF CORPORATION: \_\_\_\_\_

DOCUMENT NUMBER: P15000089469

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jessica Shraybman

Name of Contact Person

Salmon Legal Group, PL

Firm/ Company

1395 Brickell Ave., Ste. 800

Address

Miami, FL 33434

City/ State and Zip Code

jessica@salmonlegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Shraybinan at (786 ) 508,2020 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



	Articles of Amendment to Articles of Incorporation of	UL EN
NP. Inc.	0	H 2
(Name of Corr	poration as currently filed with the Florida Dept. of State)	 
5000089469		3
(1	Document Number of Corporation (if known)	¥
rsuant to the provisions of section 607,1006, F Articles of Incorporation:	florida Statutes, this Florida Profit Corporation adopts the followin	g amendment(s) b
. If amending name, enter the new name of t	the corporation:	
		The new
ord "chartered," "professional association," o		
Principal office address <u>MUST BE A STREET</u>	<u>"ADDRESS</u> )	
Principal office address <u>MUST BE A STREET</u> . <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFIC</u>	<u>TADDRESS</u> ) <u>TADDRESS</u> ) <u>TBOX</u> )	
<ul> <li>Principal office address <u>MUST BE A STREET</u></li> <li><u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFIC.</u>)</li> <li><u>If amending the registered agent and/or re</u></li> </ul>	<u>TADDRESS</u> ) <u>TADDRESS</u> ) <u>TBOX</u> )	
<ul> <li>Principal office address <u>MUST BE A STREET</u></li> <li><u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFIC</u>)</li> <li><u>If amending the registered agent and/or renew registered agent and/or the new registered</u></li> </ul>	<u>TADDRESS</u> ) <u>TADDRESS</u> ) <u>TBOX</u> )	-
). <u>If amending the registered agent and/or renated agent and/or the new registered agent agent and/or the new registered agent ag</u>	TADDRESS ()         TEBOX()	-

<u>New Registered Agent's Signature, if changing Registered Agent:</u> Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

.

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

## Example:

X Change	$\underline{PT}$	<u>John Doe</u>	
<u>X</u> Remove	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	<u>8V</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Brian H. Bernstein	9155 South Dadeland Blvd.
Add			#1002
XRemove			Miami, FL 33156
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			·····
Remove			·
6) Change			
Add			,
Remove			······

Allach additional	ding additional Articles, heets, if necessary).— (Be	<u>emeritic)</u>	<u></u> ,		
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lf an amendment	provides for an exchange	reclassification, o	r cancellation of iss	ued shares.	
provisions for in	plementing the amendme	ent if not contained	in the amendment i	<u>itself:</u>	
(if not applic	ble, indicate N/A)				
	<u> </u>				··

The date of each amendment(s) adoption: . if other than the date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval. □ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement* must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval by (voting group) □ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. □ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated Sen Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that (iduciary) BERNSTEIN H JV-IAN (Typed or printed name of person signing) RESIDENT itle of person signing)