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ALLAHASSEE, FL

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2022 JUN -2 AM 10: 08
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION:	USI COMMERCIAL,	INC.
DOCUMENT NUMBER		L16000040873	
The enclosed Articles of A	mendment and fee are su	bmitted for filing.	
Please return all correspon	dence concerning this ma	tter to the following:	
	М	IGUEL V. PEREZ RENDII	LES
		Name of Contact Person	
		ROUSSEAU GROUP, INC	C
		Firm/ Company	
	47.	37 NORTH OCEAN DRIV	E 306
		Address	
	FORT I	LAUDERDALE, FLORIDA	33308
		City/ State and Zip Code	:
		info@rousseaugroup.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
MIGUEL V. PE	REZ RENDILES	at (_)(954) 491-1800
Name of Co	ontact Person	Area Cod	le & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendn Division P.O. Box	Address nent Section of Corporations c 6327 see, FL 32314	Amendi Division The Ce	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUN -2 AM 10: 08 (Name of the Limited Liability Company as it now appears on our records. TALL AHASSEE. FLOW:

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 62 26 206 and assigned Florida document number <u>L1600040873</u>. 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida _ Cire

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.

It 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	<u>\$</u>	Type of Action
PIT	Wignel VF	Perez Renliks	RY19 F. Commercul Sutto 103 FT Lauderdale, FL 33	BlyDAdd
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). If amer	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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<u>Note:</u> 1	re date, if other than the date of filing:
f the record ecord is file	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.
Dated	JUNE 02, 2022
174160 _	
	Signature in a member of a distribution of a member
	MIGUEL V. PEREZ RENDILES
	Typed or printed name of signer

Filing Fee: \$25.00