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Office Use Only



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SECRETARY OF STATE
FALLAHASSEE F STATE

D. BRUCE

JAN 25 2011

**EXAMINER** 

## **COVER LETTER**

SUBJECT:	UNIVERSE INTER			
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		•
		ALICE EDERY		
		Name of Person		
	Firm/Company			
,	25	35 PINE TREE DRIVE	,	
		Address		
	MIAMI BEACH, FLORIDA 33140			
	City/State and Zip Code		HAS	
	E-mail address: (	ederyllc@yahoo.com to be used for future annual report notifica	ation)	SEC. 22 IT
For further information	concerning this matter, please o	all:		FSI
<del>*</del>	ICE EDERY		03-9500	ANDA RIDA
Name (	of Person	Area Code & Daytime	Telephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Sectificate of Certified Control (additional)	of Status &
·				

**MAILING ADDRESS:** 

TO:

Registration Section
Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALICE EDE	ERY, LLC	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now apper iability Company)	rs on our records.)
The Articles of Organization for this Limited Liability Company  Florida document numberL0500057950	were filed on	JUNE 13, 2005 and assigned
This amendment is submitted to amend the following:		<b>4</b>
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :
UNIVERSE INTERNATI	ONAL REALT	YLLC
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Comp	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1000 5TH S	TREET SUITE 200
(Principal office address MUST BE A STREET ADDRESS)	MIAMI BEA	CH, FLORIDA 33139≧∰ 🚾
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	i.	
I hereby accept the appointment as registered agent and agr the provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as p	lete performanc	e of my duties, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action **Title Name Address MGRM** ALICE EDERY **2535 PINE TREE DRIVE** ₹ Add MIAMI BEACH, FLORIDA 33140 Remove □ Add ☐ Remove ☐ Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JANUARY 21** 2011 Dated Signature of a member or authorized representative of a member ALICE EDERY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00