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SECRETARY OF STATIONS
DIVISION OF CORPURATIONS

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N. Culligan MAR 1 - 2011

COVER LETTER

TO:	Registration S Division of Co					
SHRJI	FCT·	SANDCHRIS UNIVE	RSAL MANAGEMENT	LLC		
Name of Limited Liability Company						
The en	closed Articles of	f Amendment and fee(s) are sul	bmitted for filing.			
Please	return all corresp	ondence concerning this matter	r to the following:			
			Wagner Sandoval			
			Name of Person			
			UNIVERSAL MANAGEME	NT LLC		
			Firm/Company			
		2295 S Hiawassee Rd Suite 201-c				
Address				**************************************		
	Orlando Florida 32835					
		City/State and Zip Code				
		wagnerdiscovery@yahoo.com E-mail address: (to be used for future annual report notification)				
For fire	that information.	concerning this matter, please of	•	iteation)		
roi iui	uici miormation	concerning uns matter, please t	411.			
	 	gner sandoval	at (321)	5271604		
	Name (of Person	Area Code & Daytin	ne Telephone Number		
Enclos	ed is a check for t	the following amount:				
₹ 25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Regist	ING ADDRESS: ration Section on of Corporations	STREET/COUR Registration Section Division of Corpo	on		

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

11 FEB 28 AM 11: 23 SANDCHRIS UNIVERSAL MANAGEMENT LLC (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 ____ 02/24/2011 and assigned L09000014799 Florida document number 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: 2295 S.Hiawassee Rd Suite 201-c (Principal office address MUST BE A STREET ADDRESS) Orlando Florida 32835 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 City

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 608, 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

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					
<u>Title</u>	Name	Address	Type of Action		
MGR	Javier Porto	181 CRANDON BLVD APT 104 KEY BISCAYNE Florida 33149	Add Remove		
MGR_	Wagner Sandoval	3392 westchester sq blvd #203 Orlando florida 32835	✓ Add ☐ Remove		
MGR	Natalie Nicholas	3392 Westchester Sq Blvd #203 Orlando florida 32835	Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.	DIVISION OF CORPORATIONS IN FEB 28 AM II's 23		
Dated	24th February ,	2011	- 7 ₀		
	Signature of a n	nember of authorized representative of a member			
		Typed or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00