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SECINETARY OF STATE
SALI ANASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: UNIVERSAL NAPLES, LLC	
Name of Limited Liability Co	mpany
Dear Sir or Madam:	
The enclosed Articles of Correction and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following	g:
Mary Lou Rodon	
Name of Person	_
Mary Lou Rodon, P.A.	
Firm/Company	_
2222 Ponce de Leon Blvd., PH	
Address	_
Compl. Cohine Figure 1, 22124	
Coral Gables, Florida 33134 City/State and Zip Code	-
Chylada and Elip Code	
llara@sralaw.com	
E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
Lucia M. Perez at (305	_)_445-8881
Name of Person Area Co	ode & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section
Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee \$25 Filing Fee \$25 Certificate of Status Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

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Electronic Articles of Organization For Florida Limited Liability Company

L10000072078 FILED 8:00 AM July 08, 2010 Sec. Of State Isellers

Article I

The name of the Limited Liability Company is: UNIVERSAL NAPLES, LLC

Article II

The street address of the principal office of the Limited Liability Company is: 7920 MAHOGANY RUN LANE #713 NAPLES, FL. 34113

The mailing address of the Limited Liability Company is:

2222 PONCE DE LEON BLVD. PENTHOUSE SUITE CORAL GABLES, FL. 33134

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

MARY LOU RODON 2222 PONCE DE LEON BLVD. PENTHOUSE CORAL GABLES, FL. 33134

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: MARY LOU RODON

Article V

The name and address of managing members/managers are:

Title: MGRM JORGE R MARINSALTA 2222 PONCE DE LEON BLVD., PH CORAL GABLES, FL. 33134

Signature of member or an authorized representative of a member Signature: JORGE RICARDO MARINSALTA

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