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COVER LETTER

TO: Registration S Division of Co	Section rporations			
SUBJECT:	Universa	al Products LLC		
	Name of Lim	ited Liability Company	· · · · · · ·	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
		Ken Woodburn	·····	
		Name of Person		
		Firm/Company	<u>. </u>	
	2	2842 Buccaneer Drive		
		Address	•	
	,	Winter Park Fl 32792		
		City/State and Zip Code		
	E-mail address: (to be used for future annual report notifica-	tion)	
For further information	concerning this matter, please of	call:		
K	en Woodburn		62-5459	
Name of Person		Area Code & Daytime Telephone Number		
<i>,</i> *				
Enclosed is a check for	the following amount:		,	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS: 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

Universal Products LLC
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
(AT Tortal Emilion Education)
The Articles of Organization for this Limited Liability Company were filed on November 1, 2011 and assigned
Florida document numberL11000124227
· · · · · · · · · · · · · · · · · · ·
This amendment is submitted to amend the following:
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:
(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 ne
registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address:
Enter Florida street adaress
, Florida
City Zip Code
New Registered Agent's Signature, if changing Registered Agent:
To the second se
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
the provisions of all statutes retailve to the proper and complete performance of my duties, and I diggamitar 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Type of Action <u>Title</u> <u>Name</u> **Address** Ken Woodburn MGRM ☐ Add ✓ Remove 2842 Buccaneer Dr Winter Park FI 32792 Universe Products Inc MGRM 2842 Buccaneer Dr. ✓ Add Remove Winter Park FI 32792 Remove □Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ Signature of a member or authorized representative of a member WOOD BURN Typed or printed name of signee

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Filing Fee: \$25.00