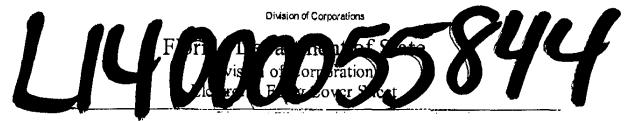
From:3025751642

Page: 1/4

4/2/2014



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : AGENTS AND CORPORATIONS, INC

Account Number : 120010000112

Phone : (302) 575-0875

Fax Number

; (302)575-1642

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:				

## FLORIDA LIMITED LIABILITY CO.

Universal Marketing Services, LLC

Certificate of Status	0
Certified Copy	0
Page Count	021-
Estimated Charge	\$125.00

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APR 0 7 2014

D. BRUCE

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4/3/2014 4:12:51 PM PAGE 1/001 Fax Server

April 3, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

AGENTS AND CORPORATIONS, INC.

SUBJECT: UNIVERSAL MARKETING SERVICES, LLC

REF: W14000021375

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org:

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited " Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is S39479.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II FAX Aud. #: H14000078559 Letter Number: 114A00007197

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SECHELLA SECHELA CA STATE
TALLAHASSEE FLORIDA

P.O BOX 6327 - Tallahassec, Florida 32314

## H14000078559 3

## AR'DOLES OF ORGANIZATION FOR FLORIDA LIMIDED LIABILITY COMPANY

ARTICLE 1 - Name. The name of the Limited Liability Company is:	
Universal Marketing Specialists, LLC (Must end with the words "Limite	d Liability Company, "L.C.C.," or "ELC.")
ARTICLE II - Address: The mailing address and street address of the principal	
Principal Office Address: 5224 West SR 46 #424 Sanford, FL 32771-9230	Mailing Address: \$224 West SR 46 #424 Sanford, FL 32771-9230

ARTICLE III - Rogistered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

AGENTS AND CORPORATIONS INC.

300 FIFTH AVENUE SOUTH SUITE 101-330 Florida street addiess (P.O. Box NOT receptable)

Naples FL 34012

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 vertificate, 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 as provided for in Chapter 605, F.S.

Agents and Corporations, Inc.

John L. Williams - President

(CONTINUED)

Page Lof?

## H14000078559 3

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR and MGR	Nicholas Cardaci
	5224 West SIC 16 11424
	Sanford, FL 32771-9230
	4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -
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ective date is listed, the date must be specific and c	: (OPTIONAL) cannot be more than five business days prior to or 90 days after
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LE V: Effective date, if other than the date of filing: fective date is listed, the date must be specific and c of filing.)  LE VI: Other provisions, if any,  REQUIRED SIGNATURE:  Signature of a member or a (in accordance with section 605.0203) constitutes an affirmation under the per	an authorized representative of a member.  (1) (b), Florida Statutes, the execution of this documents in the facts stated herein are true.  (a) (b) the following that the facts stated herein are true.  (b) the facts stated herein are true.
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