

L1500003049

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MAR 24 2015
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UNIVERSO LED LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FLAVIO LUIS SARAIVA

Name of Person

UNIVERSO LED LLC

Firm/Company

7665 CURRENCY DR

Address

ORLANDO, FL 32809

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FLAVIO SARAIVA

at (407) 990-2849

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

☐ \$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

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SECRETARY OF STATE

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

UNIVERSO LED 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 01/07/2015 and assigned
Florida document number L15000003099.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

UNIVERSE LED USA LLC

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)

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TALLAHASSEE, FLORIDA

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

_____, Florida _____
City Zip Code

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MBR	Uira Kayano Nobrega	Rua Barao do Jaceguai 908	<input type="checkbox"/> Add
		Apt 222B	<input checked="" type="checkbox"/> Remove
		Sao Pualo, SP 06543 BR	
MBR	Arnaldo Luiz Saraiva	Al. Gregotio Bogossian Sobreinho, 80	<input type="checkbox"/> Add
		Satana de Parnaiba, SP 06543	<input checked="" type="checkbox"/> Remove
MGR	Andreza H. T. P. Saraiva	4626 Golden Canna Way	<input checked="" type="checkbox"/> Add
		Orlando, FL 32811	<input type="checkbox"/> Remove
MBR	Flavio Luis Saraiva	4626 Golden Canna Way	<input type="checkbox"/> Add
		Orlando, FL 32811	<input checked="" type="checkbox"/> Remove
MGR	Flavio Luis Saraiva	4626 Golden Canna Way	<input checked="" type="checkbox"/> Add
		Orlando, FL 32811	<input type="checkbox"/> Remove
MBR	UNIVERSO LED BRASIL SISTEMAS DE ILUMINAÇÃO LTDA	Rua Napolis, 590	<input checked="" type="checkbox"/> Add
		Jd Colibri	<input type="checkbox"/> Remove
		Cotia, SP 06712-380 BR	

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LEANDRO H. SARAIVA
ALLAN SARAIVA
ALLAN SARAIVA

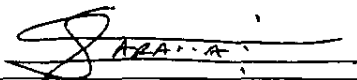
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated _____,



Signature of a member or authorized representative of a member

MGR

Typed or printed name of signee

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Filing Fee: \$25.00

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