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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:	SAL RESORT SOLUTIONS, I	LAC	
	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	-	
	MAFFETTONE, NEIL, JI	₹	
		Name of Person	
	UNIVERSAL RESORT	SOLUTIONS, LLC	
	***************************************	Firm/Company	
	5 COLONY CRT		
		Address	न्य क
	PALM COAST, FL 32137	7	
		City/State and Zip Code	SSE 23 F
	universalresortsolutions@g	mail.com to be used for future annual report notif	icetion!
For further information o	oncerning this matter, please c	•	ication)
MAFFETTONE, NEIL,	JR	386 225-3484	
Name o	f Person		: Telephone Number
Enclosed is a check for the	ne 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 RESORT SOLUTIONS, LLC		
(Name of the Limited Liability Compa (A Florida Limited	env as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed onAugust 10th, 2015	and assigned
Florida document numberL15000135613		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited list	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the	a medi
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRESS)	25 OLD KINGS NORTH, UNIT 5B	京福 香 州
	PALM COAST, FL 32137	15th 7 F
		留き 四
Enter new mailing address, if applicable:		三方里し
· · · · ·	25 OLD KINGS NORTH, UNIT 5B	S-7 12
Mailing address MAY BE A POST OFFICE BOX)	PALM COAST, FL 32137	- 第一 6
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here. Name of New Registered Agent: N/A		er the name of the n
New Registered Office Address:	Enter Florida street address	
	Linei i ivina sa eei aata ess	
•	, Florida	Zip Code
	Cay	zip Coue

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Keith Parker. M.	3 Freneau Ln	
		Palm Coast, Fl. 32137	■ Remove
			☐ Change
			Add
	•		Remove
			Change
	HE-TE. TOTAL		Add T
			Change
			© Add
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			☐ Change
<u></u>			Add
			Remove
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			Add
			☐ Remove
			☐ Change

me	, MAFFETTONE, NEIL, JR, at the time the Articles of Organization were filed on August 10th, 2015.	
Do	cument Number L15000135613	-
Ple	ase make the appropriate corrections to the original filing which would make me, Neil Maffetone Jr.,	-
the	sole MGR for UNIVERSAL RESORT SOLUTIONS, LLC from its conception. Thank You for your	-
atte	ention to this matter. (SEE PG. 3)	-
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an effect lote: If	date, if other than the date of filing:	05.020° ted as
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl 0th day after the record is filed.	ier o
ated	November 12th 2015	

Page 3 of 3

Filing Fee: \$25.00