## 116000131320

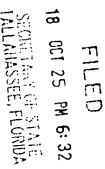
(Re	questor's Name)	
DA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
l		

Office Use Only



400319866604

10/25/18--01018--018 \*\*60.00



NOV 0 7 2018 S. YOUNG

## **COVER LETTER**

		stration Se sion of Co	rporations			
SUBJEC	·T·.	CAD ASS	OCIATES UNIVERSE			
SOBJEC			Name of Lin	nited Liability Company		
The enclo	osed	Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ret	turn :	all correspo	ondence concerning this matter	to the following:		
			Rodolphe Simon			
			Name of Person			
				Firm/Company		
			2811 Ruleme St Apt 401			18 18 18
			Eustis, Fl. 32726	Address		OCT 25
			rsimon@caduniverseassoci	City/State and Zip Code ates.com	·	25 PH 6: 32
For furthe	er inf	ormation c	E-mail address: (oncerning this matter, please c	to be used for future annual report noti all:	fication)	32 ATE ORIDA
Rudi Sim	non			4()7 325-()254		
		Name o	f Person	Area Code Daytim	e Telephone Number	<del></del>
Enclosed	is a c	theck for th	ne following amount:			
□ \$25.0	)O Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
		Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 rssee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAD ASSOCIATES UNIVERSE		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on JULY 12 2016	and assigned
Florida document number L16000131320		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
CAD UNIVERSE LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	same	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	same	ES B T
Enter new mailing address, if applicable:	see principal address-same	5 PH 6:
(Mailing address MAY BE A POST OFFICE BOX)		3: 32
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>e</u> g:	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florid	ła
	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person\_being added or removed from our records:

MGR = -N $AMBR = A$	Janager Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			☑ Remove
			☐ Change
			□ Remove
			FILED  FILED  SCHOOL 25 PM 6: 32  SCHOOL 25 PM 6: 32
			FILED DCT 25 PH DCT 25 PH DCT 25 PH DCT 25 PH DCT 25 PH
			GReynove B
			32 
			□ Add
		_/	Remove
			Change
	/	/	
			□ Remove
			Change
	/		□ Remove

			<del> </del>
		WF 11	
		/	
		/	
		<del></del>	<del></del>
			EG 0
	/	<del></del>	
<del></del>		<del></del>	
		<u> </u>	
	<del></del>		7
Effective date, if other than the date of filing:  f an effective date is listed, the date must be specific and cannot be prio  Note: If the date inserted in this block does not meet the applic document's effective date on the Department of State's records	rable statutory filing	(optiona e than 90 days after filir requirements, this da	ig.) Pursuant to 605.0207 (
e record specifies a delayed effective date, but no The 90th day after the record is filed.	ot an effective tir	ne, at 12:01 a.m	. on the earlier of:
Oated OCTOBER 21 2018	_·		
Signature of a member or auth	<u>ر</u>	<del> </del>	

Page 3 of 3

Filing Fee: \$25.00