L20000379810

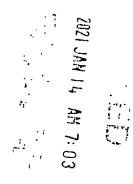
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O SIMMONS FEB 22 2021

COVER LETTER

TQ:

Tallahassee, FL 32314

	ration Sec on of Corp					
U SUBJECT:	NIVERSA	L PRIVATE LOAN LLC				
SOBJECT:		Name of Limited Liability Company				
The enclosed A	rticles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return ali	correspor	ndence concerning this matter	to the following:			
		Aidan O. Gilbert, Authoriz	zed Person			
			Name of Person			
		Neal Gerber & Eisenberg,	LLP			
			Firm/Company			
		2 North LaSalle St., Ste. 1	700			
		Address				
		Chicago, IL 60602				
			City/State and Zip Code	· · · · · ·		
		agilbert@nge.com	to be used for future annual report no	atification)		
For further info	rmation co	oncerning this matter, please ca	•	omeanon,		
Aidan O. Gilbe	rt, Authori	ized Person	312 269-5208			
	Name of	Person	at () Area Code Dayti	ime Telephone Number		
Enclosed is a ch	neck for the	e following amount:				
■ \$25.00 Filin	ng Fce	□ \$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)		
	g Address		Street Address:	· cation		
	tration S ion of Co	ection orporations	Registration S Division of Co			
	Box 6327		The Centre of	•		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



UNIVERSAL PRIVATE LOAN LLC

2021 JAH 14 AM 7: 03

(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 December 4, 2020 Florida document number L20000379810 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: UNIVERSAL PRIVATE LOANS LLC The new name must be distinguishable and contain 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 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 _____ 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

_____ Change

MGR = Manager
AMBR = Authorized Memb

WMRK = V	Authorized Member	2021 1411 1 411 7 7	
<u>Title</u>	<u>Name</u>	Address 2021 JAN 14 AM 7: 03	Type of Action
MGR	ROBERT AMBROSI	100 SUNRISE AVE., APT. 522	□ Add
		PALM BEACH, FL 33480	□Remove
MGR	MARC PEREL	2665 N. OCEAN BLVD.	□Add
		GULF STREAM, FL 33483	□Remove
			Change
MGR	GARY EIDELSTEIN	2 GROVE AISLE DRIVE, SUITE 1602	□ Add
		MIAMI, FL 33133	□ Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add

January 4 2021 Signalure of a member or authorized representative of a member	nending any other information, enter change(s) here: [[]] The name Mark Perel is corrected to read Marc Perel	one 14 All 7- U3
rective date, if other than the date of filing:		
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Filing Fee: \$25.00