L22 000 378057

(Requestor's	Name)
(Address)	
(Address)	
(City/State/Z	tp/Phone #)
PICK-UP V	VAIT MAIL
(Business E	ntity Name)
(Document I	umber)
Certified Copies Ce	tificates of Status
Special Instructions to Filing Off	cer:
Office	Use Only



700395950157

10/12/22--01008--008 **25.00

2022 OCT 13 MM 10: 00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UNIVERSAL SURPLUS RECOV			
(Name of the Lim	Ited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)	
The Articles of Organization for this Limited L	Liability Company were filed on	8/24/2022 and assign	ed
Florida document number L22000378057	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company." th	c designation "LLC" or the abbreviation "L.L.C	
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
		122 C	- 194
		(L. A)	ق حيد
Enter new mailing address, if applicable:		<u></u>	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	<u></u>	**************************************
		<u> </u>	
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our	r records, enter the name of the new re	> > <u>egistere</u>
Name of New Registered Agent:	ROSAURA ANGIUS		
New Registered Office Address:	1431 SHELBY PKWY		
	Enter F	Florida street address	
	CAPE CORAL	, Florida 33904	
	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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	JOSEPH ANGIUS		
		1431 SHELBY PKWY CAPE CORAL FL 33904	≡ Remove
			□Change
MGR	ROSAURA ANGIUS	1431 SHELBY PKWY CAPE CORAL FL 33904	= Add
			□Remove
			🗆 Change
			□Add
			SHCRET Ghange
			3 DATE OF THE PROPRIES
			□Change
			□Add
			🗆 Renwye
			□Add
			□ Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheet	ts, if necessary.)
	2022 DC SECRE
	<u>> </u>
	00 O
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear record is filed.	lier of: (b) The 90th day after the
Dated <u>Sept 7</u> 2022	
Signature of a member or authorized representative of a mem	per
Typed or printed name of signee	15

Filing Fee: \$25.00