To:

(shown below) on the top and bottom of all pages of the document,

(((H23000415488 3)))



H230004154883ABC2

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068 Phone : (407)326-8484 Fax Number : (407)604-6519

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ___contact@medeirossouza.com___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN UNIVERSAL GYM ENTERPRISE LLC

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Registration Section

Tallahassee, Fl. 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

From: RUBEM SOUZA

TO:

COVER LETTER

Divi	ision of Cor	porations		
CHDIPAT.	UNIVERS	AL GYM ENTERPRISE LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Rubem Souza		
			Name of Person	
		Medeiros Souza corp		
		- · · · · · · · · · · · · · · · · · · ·	Firm/Company	
		1711 Amazing Way, Ste 2	13	
		Address		
		Ocace, FL 34761		
			City/State and Zip Code	•
		contact@inedeirossouza.coi		
			to be used for future annual report n	otification)
For further in	iformation c	oncerning this matter, please co	all:	
Rubem Souz	a		407 326 - 848	4
	Name o	f Person		ime Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	lingAddres gistration S		<u>StreetAddress:</u> Registration S	Section
-	•	orporations	Division of C	orporations
P.O	Box 632	7	The Centre of	「Tallahassee

UNIVERSAL GYM ENTERPRISE LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	nited Liability Company as it now appears on (A Florida Limited Liability Company)	our records,	
The Articles of Organization for this Limited I	Liability Company were filed on $\frac{06/22/2}{1}$	023	andassigned
florida document number L23000301132			
his amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability company here:		
UNIVERSAL PROPERTIES ENTERPRISE LLO	c		
he new name must be distinguishable and contain the	words "Limited Liability Company," the design	ation "LLC" or the abbrevia	ation "L.L.C."
Enter new principal offices address, if appli	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
atter new maning addressen applicables			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	E BOX)		
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office address	registered office address on our recoress here:	ds, enter the name of t	the new regis
Mailing address MAY BE A POST OFFICE . If amending the registered agent and/or	registered office address on our recor-	ds, enter the name of t	the new regis
Mailing address MAY BE A POST OFFICE If amending the registered agent and/or gent and/or the new registered office address	registered office address on our recoress here: MEDEIROS SOUZA CORP 1711 Amazing Way, Ste 213	<i>J</i>	the new regis
Mailing address MAY BE A POST OFFICE If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:	registered office address on our recoress here: MEDEIROS SOUZA CORP	reet address	(2) (3) (1) (1) (1)
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:	registered office address on our recoress here: MEDEIROS SOUZA CORP 1711 Amazing Way, Ste 213	reet address	(2) (3) (1) (1) (1)

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

ĵ٥.

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	LOMEU, FABIANA M	1711 AMAZING WAY, SUITE 213 F	□ Add
		OCOEE, FL 34761	≣Remove
			🗆 Change
MGR	FABIANO R MACHADO	1711 AMAZING WAY,	≣Add
		SUITE 213	□Remove
		OCOEE, FL 34761	
MGR	CARLOS A MACHADO SANTOS	1084 Sadie Ridge Rd	
		Clermont, FL 34715	□Remove
			□ Change
AMBR	CITY CONNECT USA LLC	17H AMAZING WAY,	= Add
		SUITE 213	🗀 Remove
		OCOEE, FL 34761	□ Change
			🗆 Remove
			□Remove
			□ Change

From: RUBEM SOUZA

If amending any other info	ormation, enter change(s) here: (Attach additional sheets, if necessary.)	
 		
. 40.000		
		
 		
Note: If the date inserted in th	the date of filing:	207 (3 as th
ne record specifies a delayed effe ord is filed	Sective date, but not an effective time, at 12:01 a.m. on the earlier of (h). The 90th day after the	hc
Dated Orlando	12/05/2023	
Dated	 `	
	Signature of a member or authorized representative of a member	
Rubem Souza		
	Tyred or printed name of sience	