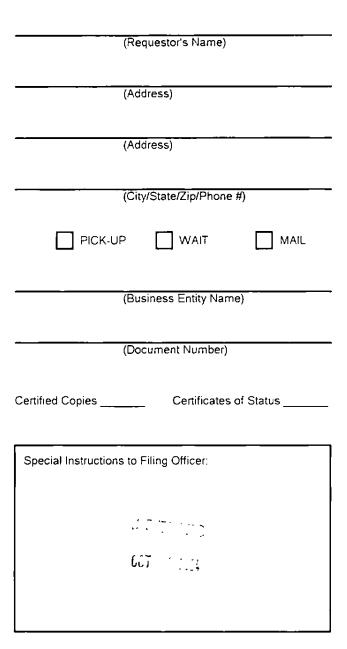
## L23000403565

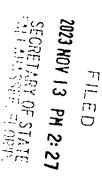


Office Use Only



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## **COVER LETTER**

Div	ision of Cor	porations				
oup in or	A UNIVERSAL CONNECTION PLUS LIMITED LIABILITY COMPANY  Name of Limited Liability Company					
SUBJECT:						
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		GLORIA PILLOT				
			Name of Person			
			Firm/Company			
		6240 FUNSTON ST				
			Address	- 11211		
		HOLLYWOOD FL 33023				
			City/State and Zip Code			
		MIKE@AUNIVERSALCC				
		E-mail address: (	to be used for future annual report noti	fication)		
For further in	formation co	oncerning this matter, please co	all:			
GLORIA PII			954 818-2156 at ( )			
	Name of	Person	Area Code Daytime	e Telephone Number		
Enclosed is a	check for th	e following amount:				
<b>≅</b> \$25.00 F	iling Fec	□ \$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

TO:

Registration Section

Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Line Countries)	· ·	<u> </u>
(A Florida Limit	npany as it now appears on our recorded Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability Compa	any were filed on	and assigned
Florida document number L23000403565		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
A UNIVERSAL CONNECTION PLUS LLC		<b>20</b> :
The new name must be distinguishable and contain the words "Limited Lis	ability Company," the designation "LLC	or the abbreviation "LC."
Enter new principal offices address, if applicable:		100 T
<u>Principal office address MUST BE A STREET ADDRESS)</u>	<del></del>	<u> </u>
		93 <b>?</b>
Inter new mailing address, if applicable:		<b>意思 2</b>
Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
		<del></del>
3. If amending the registered agent and/or registered offic	e address on our records, enter	the name of the new register
gent and/or the new registered office address here:	<u> </u>	the maine of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	5
	Flo	orida
	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
AMBR	MIGUEL CASTRO	6240 FUNSTON ST	□Add
		HOLLYWOOD FL 33023	■Remove
			□Change
			□Remove
			□ Change
			□Remove
			□Change
			□Add
			□Remove
			Change
			\Add
			□ Change
			□Add
			□Remove
			□ Change

D. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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<b>~</b> −	
(If an offe <u>Note:</u>	O8/23/2023 (optional)  ctive date, if other than the date of filing: (optional)  ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that it is effective date on the Department of State's records.
the record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated_	OCTOBER 31 2023
	Signature of a member of authorized representative of a member
	GLORIA I. PILLOT
	Typed or printed name of signee

Filing Fee: \$25.00