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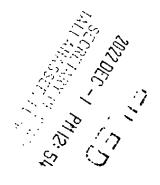
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION		Universelle de Florid	e Inc	
	N17000007519			
DOCUMENT NUMBER:				
The enclosed Articles of An	nendment and fee are sub	mitted for filing.		
Please return all correspond	ence concerning this matt	er to the following:		
Christian GUERIN				
		(Name of Contact Per	son)	, , , , , , , , , , , , , , , , , , ,
Fraternite Universelle de Fl	loride			
		(Firm/ Company)		
531 Ranch Road				
		(Address)		
WESTON FL 33326				
		(City/ State and Zip C	ode)	
floridafm17@gmail.com				
Ŧ	E-mail address: (to be use	d for future annual repo	rt notification	1)
For further information con-	cerning this matter, pleaso			
	(Name of Contact Persor	n) at	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida De	epartment of	State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address		Stre	et Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	ot	은 2 원
Fraternite Universelle de Floride Inc		CR: LAI
Name of Corporation as currently filed with the Florida	Dept. of State)	
N17000007519		552 <u>-</u>
(Document Numb	per of Corporation (if know	vn) T
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For P	Profit Corporation adopts the followin
A. If amending name, enter the new name of the corporate N/A	tion:	The man
name must be distinguishable and contain the word "corpora	ation" or "incorporated" o	The new or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.		, , , , , , , , , , , , , , , , , , ,
	N/A	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>	.)	
C. Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered offi		ter the name of the
new registered agent and/or the new registered office a	adaress:	
N/A Name of New Registered Agent:		
531 Ranc	ch Road	
		la street address)
New Registered Office Address:	(F107 tt	a sireet (dairess)
WESTO	N	33326
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	l Agent:	
I hereby accept the appointment as registered agent. I am fa		obligations of the position.
•	·	- •
	ionature of New Registere	d Agent if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Si	ones		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) N/A Change Add				
N/A Remove				
2) N/A Change Add				
N/A Remove Change N/A Add N/A Remove				
4) N/A Change Add				
N/A Remove				
5) N/F Change Add				
N/A Remove				
6) N/A Change Add				
N/A Remove				
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)		
Said organization is orga	unized exclusively	for charitable, religious, educational, and scie	ntific purposes, including for such	
purposes, including, for s	such purposes, the	making of distributions to organizations that o	qualify as exempt organizations	
described under Section :	501(c)(3)of the int	ernal Revenue Code, or corresponding section	of any future federal tax code.	
Upon the dissolution of t	he organization, as	ssets shall be distributed for one or more exem	pt purposes within the meaning	
of section501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be				

disposed of shall be disposed of by a court of competent jurisdiction in the county	in which the principal office of
the organization is then located, exclusively for such purposes or to such organization	tion or organizations, as said Court
shall determine, which are organized and operated exclusively for such purposes.	
	
 	
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<u> </u>	
	<u>.</u>
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment	
(no more than 90 days after amendment	file date)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Π.	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 11/28/202 Z
	Signature ————————————————————————————————————
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(V)ped or printed name of person signing)
	PRESIDENT. (Title of person signing)