## P08000052931

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Amend Hewis 4.25-09

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: _	Universal	Capital,	Inc.	
OOCUMENT NUMBER:	p0800005	2931		
The enclosed Articles of Amendm	ent and fee are subm	nitted for filin	g.	
Please return all correspondence c	oncerning this matte	r to the follow	ving:	
	Avi Bas	h		
	Name of C	Contact Person		
	Firm/	Company		
	290 174+	h St	# 518	
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For further information concerning	g this matter, please	call:		
Avi Bash Name of Contact Person		t ( <u>786</u> )	<b>302</b> - & Daytime Tele	9773
Enclosed is a check for the follow			-	
\$35 Filing Fee \$43.75 Fili Certificate	of Status	\$43.75 Filing Fo Certified Copy (Additional copy		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations	Ar	reet Address mendment Se ivision of Cor	ction	
P.O. Box 6327 Tallahassee, FL 32314	Cl	lifton Building	•	

Tallahassee, FL 32301

## **Articles of Amendment**

•	to.		
	Articles of Inco	rporation	11 .
	of	•	no.
Universal Ca	sital In	<b>^</b>	09 AUG 24 PH
(Name of Corporation as curre			
P080000		<u> </u>	The State of State
		<del></del>	- " LE, FLO
(Document Nun	nber of Corporation	on (if known)	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statute	es, this <i>Florida Profit Corpora</i>	tion adopts the following
A. If amending name, enter the new name of	f the corporation	<b>:</b>	
		- N   D	
name must be distinguishable and contain		NIN	The new
Mama must contain the word "chartered" "nec	ofessional associa	tion," or the abbreviation "P.A	l. "
B. Enter new principal office address, if app	olicable:	N A	<del></del>
B. Enter new principal office address, if app (Principal office address MUST BE A STREE	olicable: ET ADDRESS )	N A  1940 Harrison Hollywood, Fl	5t . 33020
<ul> <li>B. Enter new principal office address, if app (Principal office address MUST BE A STREE)</li> <li>C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)</li> <li>D. If amending the registered agent and/or resident and/or resident.</li> </ul>	olicable: ET ADDRESS  ET ADDRESS  ET ADDRESS  CE BOX	1940 Harrison Hollywood, Fl	33020
B. Enter new principal office address, if app (Principal office address MUST BE A STREE)  C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)	olicable: ET ADDRESS  ET ADDRESS  ET ADDRESS  CE BOX	1940 Harrison Hollywood, Fl	33020
<ul> <li>B. Enter new principal office address, if app (Principal office address MUST BE A STREE)</li> <li>C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)</li> <li>D. If amending the registered agent and/or resident and/or resident.</li> </ul>	olicable: ET ADDRESS  ET ADDRESS  ET ADDRESS  CE BOX	1940 Harrison Hollywood, Fl	33020
<ul> <li>B. Enter new principal office address, if app (Principal office address MUST BE A STREE)</li> <li>C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)</li> <li>D. If amending the registered agent and/or new registered agent and/or the new registered.</li> </ul>	elicable: ET ADDRESS  ET ADDRESS  CE BOX  registered office add  AUI	1940 Harrison Hollywood, Floaddress in Florida, enter the needs:	33020

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)

<u> Title</u>	<u>Name</u>			Address	. ,		Type of Action
PD	Auner	Dano	<u>a</u>		Harrison wood, FL		☐ Add  Remove
<del></del>							Add Remove
							Add Remove
(attach a	iding or adding andditional sheets,	if necessary	). (Be spec	ific)			·
	Change	Avi	Bash	from	<u>"T"</u>	to,	"PD"
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<u> </u>					<u> </u>	·	<del></del>
					· · · · · · · · · · · · · · · · · · ·	<del></del> -	
provis	mendment prov lons for impleme not applicable, in	enting the a	mendment if	classification not containe	or cancella ed in the am	tion of is endment	sued shares, itself:
<u></u>	· · · · · · · · · · · · · · · · · · ·						
	<u> </u>						

The date of each amendment(	s) adoption: 8/20/09
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
• •	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	<u></u>
	(voting group)
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	8/20/09
Signature (By select	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Avi Bash (Typed or printed name of person signing)
·	PD (Title of person signing)