P0900002559

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
(Business Entity Name) (Document Number) Certified Copies Certificates of Status
(Business Entity Name) (Document Number) Certified Copies Certificates of Status
(Document Number) Certified Copies Certificates of Status
(Document Number) Certified Copies Certificates of Status
(Document Number) Certified Copies Certificates of Status
Certified Copies Certificates of Status
Certified Copies Certificates of Status
,
,
Special Instructions to Filing Officer:

Office Use Only



600142357866

02/02/09--01035--001 **35.00

POPEE -2 PH 1:51

meshor

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: UNIVERSAL	MIAMI, INC	
DOCUMENT NUMBER: P0900002	559	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this r	matter to the following:	
GARY YOUNG		
(Name of 6	Contact Person)	
UNIVERSA MIAN	II, INC	
(Fim/	(Company)	
9720 COMMERCE	CENTER COURT	
FORT MYPRS (City/ State	FL 33 908	
For further information concerning this matter, pl	•	
GARY YOUNG	at (239) 466-99 (Area Code & Daytime Te	14
(Name of Contact Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for the following amount made	de payable to the Florida Depar	tment of State:
\$35 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certifled Copy (Additional copy is enclosed)	\$52.50 Filing Pee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	le

Articles of Amendment to Articles of Incorporation of

UNIVERSA	MIAMI, INC.		
Name of Corporation as curren	thy filed with the Florida Dept, of Sti	ate)	
P090000			
(Document Numb	per of Corporation (if known)		
Pursuant to the provisions of section 607.1006, following amendment(s) to its Articles of Incorporate and Province of Incorporate (s) to its Articles (s) to its	pration:	Corporation adopts t	he
A. If amending name, enter the new name of	the corporation:		
The new name must be distinguishable an "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A."	"Inv.," or Co.," or the designation	"Corp," "Inc," or	
B. <u>Enter new principal office address, if appli</u> (Principal office address <u>MUST BE A STREET</u>			
		The second	2
			FF T
C. Enter new mailing address, if applicable: (Mailing address MAX BE A POST OFFIC	TR ROY		5 ≓
(Institute matters (MAX NEW A 1 VHA VAXAL	P NVA		
		OR ?	
•			<u></u>
D. If amending the registered agent and/or renew registered agent and/or the new registered.		ter the name of the	
	VASA VANDE BARAVAVA		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)	_	
		. Florida	
-	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered position.		pt the obligations of	the
Si	gnature of New Registered Agent, if ch	anging	
	Page 1 of 3		

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)

Title	Name	Address	Type of Action
<u>VP</u>	SMIR CHOREKA	FORT MYERS, FL 3391	Add Remove
<u>v p</u>	HEITH MESSELY	970 COMMERCE CENTER C' FORT MYELS, FL 3390	Add Remove
	<u> </u>		Add Remove
	ending or adding additional Articles, en additional sheets, if necessary). (Be s		
Drov	emendment provides for an exchange islans for implementing the amendment from applicable, indicate N/A)	. reclassification, or cancellation of i	ssued shares, Litself:
	,		
		Page 2 of 3	

The mate of each whiendmen	t(s) adoption: 1 28 0 9
Effective date if applicable:	1/28/09
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CRECK ONE)
The amendment(s) was/we by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment (ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amondment(s) was/were sufficient for approval
by	(voting group)
	re adopted by the board of directors without shareholder action and shareholder
action was not required.	ere adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder
action was not required. The amendment(s) was/we	
action was not required. The amendment(s) was/we action was not required. Dated Signature	i 28 09
action was not required. The amendment(s) was/we action was not required. Dated Signature (By selection was not required.	are adopted by the incorporators without shareholder action and shareholder
action was not required. The amendment(s) was/we action was not required. Dated Signature (By selection was not required.	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court
action was not required. The amendment(s) was/we action was not required. Dated Signature (By selection was not required.	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary)
action was not required. The amendment(s) was/we action was not required. Dated Signature (By selection was not required.	i 28 09 a director, president or other efficer - if directors or officers have not been ected, by/an incorporator - if in the hands of a receiver, trustee, or other count of intended fiductory by that fiduciary) GMF-1 YULN 6

Page 3 of 3