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Division of Corp	orations	•				
SUBJECT: United Apartment Group, Inc.						
	Name of Co	rporation				
DOCUMENT NUMBE	R:D07	00004337				
The enclosed Statement of	of Change of Registered Office	Agent and fee are su	bmitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:				
Monica Slider Name of Contact Person						
	Name of Con	tact i cison				
United Apartment Group						
	Firm/Co					
	202 Fern					
	7.00	000				
	Orlando, Flo	rida 32828				
	City/State an	d Zip Code				
	Monica.Slider@	uaginc.com				
E-m	ail address: (to be used for fi		notification)			
For further information of	concerning this matter, please o	all:				
Mo	nica Slider	at (407)	353-3450			
Name of	Contact Person	Area Code &	353-3450 Daytime Telephone Number			
Enclosed is a \$35.00 che	ck made payable to the Depart	ment of State.				
	Mailing Address:	Street Ade				
	Amendment Section Division of Corporations		ent Section of Corporations			
	P.O. Box 6327	Clifton B	-			
	Tallahassee, FL 32314		cutive Center Circle ee, FL 32301			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a co	rporation organize	607.1508, or 617.1508, Flo ed under the laws of the Stat	te of Florida
in orde	er to change its registered	d office or registere	d agent, or both, in the Stat	e of Florida.
1. The name of	the corporation: United	d Apartment (Group, Inc.	
2. The principal	office address: 2561 S	W. Grapevine I	Parkway Ste. 200, Gra	apevine, TX 76051
3. The mailing a	address (if different): Sa	me		
4. Date of incor	poration/qualification:	8/28/2007	Document number:	F0700004337
	d street address of the cur rtment of State: (If resign		nt and registered office on f	ile with the
	Monica Slider			
	730 Bonnie Brae			
	Winter Park, FL 32	2789		🔯 🗟 🖟
6. The name and (if changed):	d street address of the ne	w registered agent ((if changed) and /or register	ed office
	Monica Slider			
	202 Ferryboat Ct		- N/	
,	Orlanda El 22020	P.O. Box NOT a	cceptable	
	Orlando, Fl 32828			
The street address changed will	ess of its registered office lbe identical.	ce and the street ad	ldress of the business offic	e of its registered agent,
Such change w authorized by t	as authorized by resolut he board on the corpora	ion duly adopted b tion has been notif	by its board of directors or fied in writing of the chang	by an officer so ge.
Signati	ire of an officer or director	·	Tim Settles,	President
I further agree of my duties, ar document is be.	to comply with the prov	isions of all statuted ad accept the obliga- ct a change in the	agree to act in this capaci es relative to the proper a ation of my position us reg registered office address, i	id complete performance
	gnature of Registered Agent	<u></u>	Monica Slider, Re	gistered Agent
(ehalf of an entity:		_ 	
<u> </u>	Typed or Printed Name	·		

* * * FILING FEE: \$35.00 * * *