

**FK50000000357**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

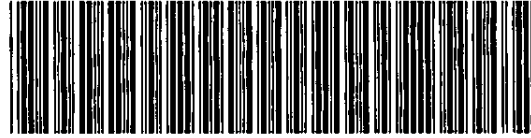
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

JAN 06 2016  
C. CARROTHERS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 5, 2015

SAM NEHME  
4760 SUNKIST WAY  
COOPER CITY, FL 33330

SUBJECT: VMC II INC.  
Ref. Number: F15000000357

We have received your document for VMC II INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

THE FORM YOU SENT IS USED FOR A FLORIDA PROFIT CORPORATION.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Cathy A Carrothers  
Regulatory Specialist

Letter Number: 315A00023430

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** UMC II INC.  
Name of Corporation

**DOCUMENT NUMBER:** F15000000357

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

SAM NEHME  
Name of Contact Person

\_\_\_\_\_  
Firm/Company

4760 SUNSET WAY  
Address

COOPER CITY, FL 33330  
City/State and Zip Code

JED@VIPERMC.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sam Nehme at ( 954 ) 449-8222  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**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 Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of DELAWARE in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: VME II INC.
- 2. The principal office address: 550 W. SUNRISE BLVD  
FT. LAUDERDALE FL 33311
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 1/29/15 Document number: F15000000357
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

-RESIGNED-

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- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JED LATKIN  
550 W. SUNRISE BLVD  
P.O. Box NOT acceptable  
FT. LAUDERDALE FL 33311

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

X [Signature]  
Signature of an officer or director

Jed Latkin  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

X [Signature]  
Signature of Registered Agent

12/2/15  
Date

If signing on behalf of an entity:  
Jed Latkin  
Typed or Printed Name

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