

486314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

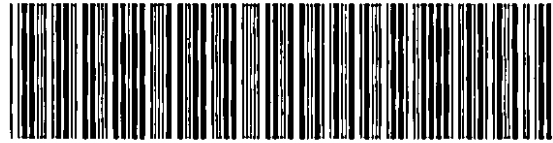
(Business Entity Name)

(Document Number)

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R. WHITE  
AIR 05 2001

# Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 4-2-21

**\*\*WALK IN\*\***

ENTITY NAME UNITED CORPORATE SERVICES, INC.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certified Copy of Arts & Amendments Complete File (Including Annual Reports)*

*Certificate of Status*

*Certificate of Status Reflecting:* \_\_\_\_\_

**\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$ 35.00

ACCOUNT # I20140000108  
United Corporate  
Services, Inc.

*Keith Sheppard*

Please call Tina at the above number for any issues or concerns. Thank you so much!

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** United Corporate Services, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 486314

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:

Inesa Shahu/Nina Tarowsky

Name of Contact Person

United Corporate Services, Inc.

Firm/Company

10 Bank Street Suite 560

Address

White Plains, NY 10606

City/State and Zip Code

registeredagent@unitedcorporate.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Inesa Shahu/Nina Tarowsky

Name of Contact Person

at ( 800 ) 899-8948

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: United Corporate Services, Inc.
2. The principal office address: 10 Bank Street, Suite 560, White Plains, NY 10606
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/07/1975 Document number: 486314
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)
- Howard Kuker, Esq.
- 9200 S. Dadeland Blvd., Suite 508
- Miami, FL 33156
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive

P.O. Box NOT acceptable

Tallahassee, FL 32312

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.

Michael A. Barr

Signature of an officer or director

Michael A. Barr

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.*

[Signature]  
Signature of Registered Agent

3-30-21

Date

If signing on behalf of an entity:

Christina Goff

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (04/13)