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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: UNIFIED SPORTSMEN OF FLORIDA INC. Name of Corporation
DOCUMENT NUMBER: 738599
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:
Recomb E. Castes Name of Contact Person Costes LAW T-12m PL Firm/Company 115 E- Paric Ave Most Address TAUSSOU I-L 32301 City/State and Zip Code mphaneer 1. @ Adv. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pic HAPT COATES Name of Contact Person at 1 80 1681 1025 Area Code & Daytime Telephone Number
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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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: UNIFIED SPORTSMEN OF FLORIDA, INC. 2. The principal office address: 110-A SOUTH MINROE ST. TACLALIASSEE PL 32301 3. The mailing address (if different): P. O. Box 1387 TACCHUSSEE FL 3230 4. Date of incorporation/qualification: 04/07/1577 Document number: 738598
3. The mailing address (if different): P.O. Box 1387 TALLMUSSED For 3230
4. Date of incorporation/qualification: <u>04/07/1977</u> Document number: <u>7385</u> 55
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)
STEPHEN KAHN
TAUAUASSEE FL 32301
TAUAUASSEE, FL 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
USE. PARIC AUE UNIT 1
MSE. PARIC Ave UNIT 1 P.O. Box NOT acceptable Tallackasses FL 32301
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.
Marin F. Wannes MARION P. HAMMER_ 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 of Registered Agent 5/12/20
If signing on behalf of an entity:
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)