Florida Department of State

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REGISTERED AGENT CHANGE UNITED CORE MANAGEMENT, INC.

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Corporate Filing Menu

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JAN 2 9 2019

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

statement of chi	ange is submitted for a corpor	592, 617.0502, 607.1508, or 617.1508, Florida Statutes, the ration organized under the laws of the State of TX. Sice or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: UNITED COR	RE MANAGEMENT, INC.	1
		toadSuite 300 San Antonio, TX 78216	
3. The mailing a	address (if different):		1
4. Date of incorp	poration/qualification: 3/29/2	2011 Document number: F11000001375	
5. The name and Florida Depar	d street address of the current rather than the street of State: (If resigned, en	registered agent and registered office on file with the interresigned)	1
	NORTHWEST REGISTERED	DAGENT, LLC.	20
	3030 N. ROCKY POINT DRIV	VE, STE 150A	IL 611
	TAMPA, FL 33607		19 JAN 28
6. The name and (if changed):	I street address of the new regi	gistered agent (if changed) and for registered office.	A
	C T Corporation System		ည္
	c/o C T Corporation System, 12	200 South,Pine Island Road	}=
		P.O. Hox NOT acceptable	
	Planistion, Florida 33324		
The street addre as changed will	ess of its registered office and be identical.	the street address of the business office of its registered	agent,
Such change was authorized by th	is authorized by resolution dulie board, or the corporation ha	ily adopted by its board of directors or by an officer so as been notified in writing of the change.	! !
100 may	The second of th	Printed or typed name and title	المستؤيد
-	re of an officer of director	Printed or typed name and sittle	•
hereby accept to further agree to serformance of ingent. Or, if this sereby confirm t	the appointment as registered o comply with the provisions i my duties, and I am familiar vs document is being filed mer that the corporation has been	d agent and agree to act in this capacity of all statutes relative to the proper and complete with and accept the obligation of my position as register rely to reflect a change in the registered office address, I a notified in writing of this change.	ed
By: O'Ke Dec	pocation System Kelses He	French 1 28/19	<u>j</u>
	ish of an entity:	/	
			I
Tyr	ped 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 (03/12)