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Office Use Only



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SECRETARY OF STATE

SEP 1 0 2013

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT, U. S. ENTERPRISES, IN OF GEORGIA

Name of Corporation

TOCHMENT NUMBER, F1200000018

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:

KENNETH W. RICKERT

Name of Contact Person

U. S. ENTERPRISES, INC.

Firm/Company

225 COREY CENTER SE

Address

ATLANTA, GEORGIA 30312

City/State and Zip Code

krickert@coreycompanies.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KENNETH W. RICKERT

.,404

419-9777

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes nge is submitted for a corporation organized under the laws of the State of GEORC to change its registered office or registered agent, or both, in the State of Florida.	GIA
1. The name of t	he corporation: U.S. ENTERPRISES, INC. OF GEORGIA	
	office address: 225 COREY CENTER SE A, GEORGIA 30312	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 01/03/2012 Document number: F12000000	018
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)	
	CT CORPORATION SYSTEM	
	1200 SOUTH PINE ISLAND ROAD	યુ
	PLANTATION, FLORIDA 33324	NISIO VISIO
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	TECRETARY PISION OF CO
	JOHN MCIVER	PH SEP SE
	4903 TRITON COURT W.	77.11 2:4
	P.O Box NOT acceptable CAPE CORAL, FLORIDA 33904-9301	Q. 6.
The street addre as changed will	ss of its registered office and the street address of the business office of its regist be identical.	ered agent,
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer e board, or the corporation has been notified in writing of the change.	so
A Signatur	KENNETH W. RICKERT, ASST. Printed or typed name and title	SECT.
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as reg s document is being filed merely to reflect a change in the registered office addre that the corporation has been notified in writing of this change. Date Date	
If signing on bel	nalf of an entity:	
John 7	Ped or Printed Name	

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