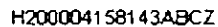


# Electronic Filing Cover Sheet

((H20000415814 3)))



To :

From:

८३

Email Address:

2727

2020 DEC -7 PM 1:14  
future  
\*\*

三三

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

((H20000415814 3)))

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

1. The name of the corporation: UNITED RETIREMENT, INC.
2. The principal office address: 545 Metro Place S. Suite 240 Dublin, OH 43017
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 07/30/2015 Document number: F15000003360
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)

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

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

LEGALINC CORPORATE SERVICES INC.

5237 SUMMERLIN COMMONS BLVD, SUITE 400

P.O. Box NOT acceptable

FORT MYERS, FL 33907

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.

Joseph Dansky  
Signature of an officer or director

Joseph Dansky, Secretary  
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

12/4/2020  
Date

If signing on behalf of an entity:

Anna Manukyan  
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 (0-4/13)

((H20000415814 3)))