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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : I20160000086 Phone : (561)508-5033

Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			

## REGISTERED AGENT CHANGE ZILLOW HOMES, INC.

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

statement of cho	ange is submitted for a corporation org	502, 607.1508, or 617.1508, Florida Statute anized under the laws of the State of Florida stered agent, or both, in the State of Fiorida	<u> </u>	
]. The name of	the corporation: Zillow Homes, Inc.		<del></del>	
2. The principal				<del></del>
3. The mailing	address (if different):			
4. Date of incor	Document number: F19000005442			
	d street address of the current registered rtment of State: (If resigned, enter resig	l agent and registered office on file with the med)	<b>;</b>	
	C T CORPORATION SYSTEM			
	1200 SOUTH PINE ISLAND ROAD		3 0: 2 0:	2921
	PLANTATION, FL 33324		() () [[]	HAY
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		TARY OF (ASSEE F	9	
	United Agent Group Inc.		STAT	路12:00
	801 US Highway 1		900	00
	P.O. North Palm Beach, FL 33408	Box NOT acceptable		
The street addr	ress of its registered office and the stre I be identical.	et address of the business office of its reg	istered a	igent,
Such change wanthorized by t	as authorized by resolution duly adop the board, or the corporation has been	ted by its board of directors or by an offic notified in writing of the change.	er so	
		Cierra Mims Attorney-in-fact		
	ute demetrices or director  If the appointment as registered agent to comply with the provisions of all si nd I am familiar with and accept the c ing filed merely to reflect a change in is been notified in writing of this chan	Printed or typed name and title and agree to act in this capacity, attutes relative to the proper and complete bligation of my position as registered age the registered office address, I hereby con ge.	e perform int. Or infirm the	nance if this at the
The Section	111	05/06/2021		
Si	gnature of Registered Agent	Date		
If signing on b	ehalf of an entity:			
Marie Heitzmar	, Special Secretary			
	Typed or Printed Name			

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