F20000000302

(Requestor's Name)		
(Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(City/State/Zip/Pitotie #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
(bocament (variable)		
Certified Copies Certificates of Status		
		
Special Instructions to Filing Officer:		

Office Use Only



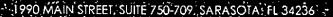
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SEP 10 2001 DICUSHING

UNISEARCH, INC.





8/25/2021

SECRETARY OF STATE OF FLORIDA DIVISION OF CORPORATIONS THE CENTRE OF TALLAHASSEE 2415 NORTH MONROE SUITE 810 TALLHASSEE, FL 32303

RE: Unisearch Change of Address

To Whom it May Concern:

Enclosed please find the applications to change the registered agent address on behalf of Unisearch, Inc. for entities that have appointed Unisearch as agent. (More applications will be forwarded in a separate package for the remaining entities). Also enclosed is check # 1043 for \$3,760. Should you have any questions, please contact me at the below number.

Thank you,

Joelle Churik

Unisearch, Inc.

1990 Main Street, Suite 750-709

Sarasota, FL 34236

888-617-4478

joelle.churik@unisearch.com

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

Pursuant to the provisions of sections 607.0502, 617.0 statement of change is submitted for a corporation org	anized under the laws of the State of WASHINGTON	
in order to change its registered office or regi	istered agent, or both, in the State of Florida.	
1. The name of the corporation: RYMAR USA INC.		
2. The principal office address: 2201 NW CORPORATE BOULEVARDSUITE: 205BOCA RATON, FL 33431		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 01/16/2020	Document number: F2000000302	
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)		
UNISEARCH, INC.		
155 OFFICE PLAZA DRIVE		
TALLAHASSEE, FL 32301		
6. The name and street address of the new registered as (if changed):	gent (if changed) and /or registered office	
UNISEARCH, INC.		
1990 MAIN STREET, SUITE 750-709		
P.O.: SARASOTA, FL 34236	Box NOT acceptable	
The street address of its registered office and the stre	eet address of the business office of its registered agent,	
Such change was authorized by resolution duly adop authorized by the board, or the corporation has been		
Signature of an officer or director	Printed or typed name and title	
of my duties, and I am familiar with and accept the o	tatutes relative to the proper and complete performance	
Dello Chur	08/17/2021 !	
Signature of Registered Agent If signing on behalf of an entity:	Date	
JOELLE CHURIK, ASST. SECRETARY 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)