

4/27/2021

Division of Corporations

Florida Department of State
Division of Corporations
 Electronic Filing Cover Sheet

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SEAL
TALLAHASSEE, FL

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: _____

STATE
TALLAHASSEE, FL

2021 APR 27 PM 2:31

FED

REGISTERED AGENT CHANGE
FRANKLIN ADVISERS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

APR 28 2021

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

1. The name of the corporation is: Franklin Advisers, Inc.
2. The principal office address: ONE FRANKLIN PKWY
SAN MATEO CA 94403
3. The mailing address (if different): ONE FRANKLIN PKWY
SAN MATEO CA 94403

4. Date of incorporation/qualification: 2/11/2021 Document Number: F21000000837

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

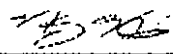
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

United Agent Group Inc.
801 US Highway 1
(P.O. Box Not acceptable)
North Palm Beach FL 33408

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.


(Signature of an officer or director)

Nicholas Nichols, Attorney-in-Fact
(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 of Registered Agent)

4/27/2021

(Date)

If signing on behalf of an entity:

Nicholas Nichols, Special Secretary
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314