

F21000004 623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Q. SILAS  
OCT 20 2021

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FILED  
2021 OCT 20 PM 1:20  
SECRETARY OF STATE  
MAINE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2021 OCT 20 PM 12:24

October 14, 2021

KSENIYA REEG  
3499 ROUTE 9N  
SUITE 3C  
FREEHOLD, NJ 07728

SUBJECT: UMH SALES AND FINANCE, INC.  
Ref. Number: F21000004623

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Because of recent changes to Chapter 607, Florida Statutes, which became effective January 1, 2020, we no longer have the statutory authority to file the enclosed document. Therefore, the enclosed document is being returned to you for appropriate handling.

The Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s) can only be filed by a Foreign Not for Profit Corporation. Your entity is a Foreign for Profit Corporation. Please complete the enclosed Amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas  
Regulatory Specialist II

Letter Number: 021A00025067

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: UMH Sales and Finance, Inc.  
Name of Corporation

DOCUMENT NUMBER: F21000004623

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kseniya Reeg

Name of Contact Person

UMH Properties, Inc.

Firm/Company

3499 Route 9N, Suite 3C

Address

Freehold, NJ 07728

City/State and Zip Code

Kreeg@umh.com

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

For further information concerning this matter, please call:

Kseniya Reeg

Name of Contact Person

at ( 732 ) 410-2884

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee.  
Certificate of Status &  
Certified Copy

Mailing Address:

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**FILED**

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

2021 OCT 20 PM 1:10

SECRETARY OF STATE  
TALLAHASSEE, FL

F21000004623

(Document number of corporation (if known))

1. UMH Sales and Finance, Inc.

(Name of corporation as it appears on the records of the Department of State)

2. New Jersey

(Incorporated under laws of)

3. August 11, 2021

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_

5. \_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) \_\_\_\_\_

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent \_\_\_\_\_

\_\_\_\_\_  
(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

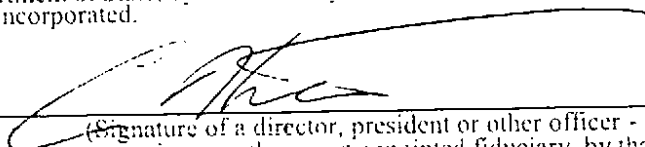
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VICE PRESIDENT	ROBERT VAN SCHUYVER	3499 ROUTE 9N, SUITE 3C	<input checked="" type="checkbox"/> Add
		FREEHOLD, NJ 07738	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

0. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

CRAIG KOSTER

(Typed or printed name of person signing)

GENERAL COUNSEL

(Title of person signing)

FILING FEE \$35.00

**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING**

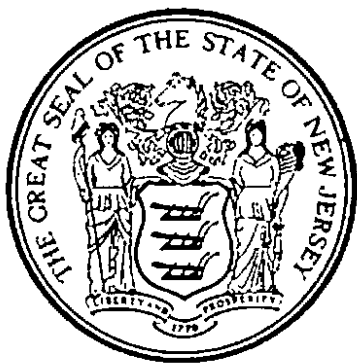
**UMH SALES AND FINANCE, INC.  
0100832571**

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on October 25, 2000.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and office are:*

**SAMUEL A LANDY ESQ  
3499 ROUTE 9 NORTH SUITE 3-C  
JUNIPER BUSINESS PLAZA  
FREEHOLD, NJ 07728**



*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
19th day of October, 2021*

**Elizabeth Maher Muoio  
State Treasurer**

*Certificate Number : 6124309869*

*Verify this certificate online at*

*[https://www1.state.nj.us/TYTR\\_StandingCertJSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCertJSP/Verify_Cert.jsp)*