

105000062734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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17 JUN 22 PM 3:24

DIVISION OF CORPORATIONS

G. SIMMONS
JUN 23 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2017

AHMAD CHEHAB
257 NW 35TH ST
BOCA RATON, FL 33431

SUBJECT: UCF GROUP LLC
Ref. Number: L05000062734

We have received your document for UCF GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons
Regulatory Specialist II

Letter Number: 617A00011950

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2017 JUN 22 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UCF GROUP LLC. REGIDTERED AGENT CHANGE OF ADDRESS

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Person

AHMAD CHEHAB

Firm/Company

UCF GROUP LLC.

Address

257 NW 35TH STREET

City/State and Zip Code

BOCA RATON FL. 33431

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

For further information concerning this matter, please call:

AHMAD CHEHAB

561

602-8135

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: UCF GROUP LLC.

2. (a) UCF GROUP LLC. (b) UCF GROUP LLC.

Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

257 NW 35TH STREET 257 NW 35TH STREET
BOCA RATON FL. 33431 BOCA RATON FL. 33431

6-24-2005 L05000062734

3. Date of filing registration in Florida 4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

AHMAD CHEHAB

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

6740 BROOKHURST CIRCLE

LAKE WORTH FL. 33463

(b) _____
Enter name of NEW Registered Agent and or NEW Registered Office address:

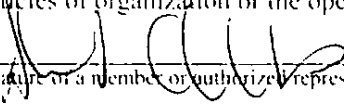
NEW Registered Office Address:

257 NW 35TH STREET

BOCA RATON FL. 33431

FILED
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DIVISION OF CORPORATIONS

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

AHMAD CHEHAB

Printed or typed name of signer

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent