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Sep 13 2018 01:50PM HP Fax Division of Corporations

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To: Division of Corporations Fax Number : (850)617-6383				
P	rom: Account Name : UNITED AGENT (Account Number : I20160000086 Phone : (561)508-5033 Fax Number : (561)694-1639	GROUP INC.		
Enter the annual	email address for this business entit report mailings. Enter only one email	i address please.		
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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.

I. Na	me of the limited liability company:			
2. (a)	250 GIBRALTAR ROAD Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) HORSHAM, PA 19044	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
3. 5 (-)	05/25/2007 Date of filing/registration in Florida C T CORPORATION SYSTEM	L070	00056238 Document number	
5. (a)	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD Registered Office Address <u>(MUST BE FLOR(DA STREET</u>)	f State:		
	PLANTATION, F	L_33324		
(b)	United Agent Group Inc. Enter name of <u>NEW Registered Agent and/or NEW Registered Office address</u> : 11380 Prosperity Farms Road #221E			
	NEW Registered Office Address:			
		L 33410		
the ch agent was/u	limited liability company is not organized under the liange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of the ganization or the operating agreement of the	of the registered liability company of the limited h	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in	
	DALL		hael Sanchez, Attorney-in-Fact	
I her provi. the ol to me	ety of a member or authorized representative of a member eby accept the appointment as registered agent and a sions of all statutes relative to the proper and complet bligations of my position as registered agent as provid rely reflect a change in the registered office address, edvin writing of this change.	gree to act in th le performance ded for in Chapt I hereby confirm	Printed or typed nome of signed is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed in that the limited liability company has been	
Signa	ture of Registered Agant	-	ecial Secretary	
	Division of Corporations• P.O	. BOX 03270 18	ukuassee, pl. 34314	

FILING FEE: \$25.00

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