

| (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: | | | | | |
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Office Use Only



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COVER LETTER

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| то: | Registration Section Division of Corporations | | | | |
|---|--|---|-----------|--|--|
| SUBJE | UFG Synergies, LLC | | | | |
| B C BOT | Name of Limited Liability Company | | | | |
| Dear Si | ir or Madam: | | | | |
| The end | closed Registered Agent/Registered Offi | ce Change and fee(s) are submitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| Mark | D. Nichols | | | | |
| | Name of Person | | | | |
| UFG Synergies, LLC | | | | | |
| | Firm/Company | | | | |
| 2121 | Vista Parkway | | | | |
| | Address | | | | |
| West | Palm Beach, FL 33411 | | | | |
| | City/State and Zip Code | | | | |
| mnich | nols@ufgcorp.com | | | | |
| Е | -mail address: (to be used for future ann | ial report notification) | | | |
| For fur | ther information concerning this matter. | please call: | | | |
| Mark | D. Nichols | 561 868-1453 | | | |
| | Name of Person | Area Code & Daytime Telephor | ie 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. 8 | lame of the limited liability company: UFG Synergie | es, LLC | | | |
|-----------------------------------|--|--|--|--|--|
| 2. (a | 2121 Victa Darlyway | (b) | same | | |
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | _ (-) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | |
| | West Palm Beach, FI 33411 | | | | |
| | 01/07/2010 | | L10000002746 | | |
| 3. | Date of filing/registration in Florida | 4. | Document number | | |
| 5. (a | Registered Agent and Registered Office shown on the records of | | | | |
| | Registered Agent and Registered Office shown on the records of Jill K. Klein | the Florida I | Dept. of State: | | |
| | Registered Office Address (MUST BE FLORIDA STREET) | | | | |
| | 2121 Vista Parkway | | | | |
| | West Palm Beach | 33411 | | | |
| | | | %.≒ N ि | | |
| (b | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> | Office add | ress: | | |
| | Mark D. Nichols | | | | |
| | NEW Registered Office Address: | | | | |
| | 2121 Vista Parkway | <u>. </u> | | | |
| | West Palm Beach FL | 33411 | | | |
| the clagent was/v the a | limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the mature of a member or authorized representative of a member | the regist ability cor of the limit limited lia | ered office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in | | |
| provi the o to me notifi | teby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide trely reflect a change in the registered office address, I ted in writing of this change. | ee to act i performa d for in Ci hereby coi | in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been | | |