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(Requestor's Name)				
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SECRETARY OF STATE

6/2/1605



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: United World Enterprises,			
N	ame of Limited	d Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered C	Office Change	and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to	the following:	
laha LaCasaia			
John LoCascio Name of Person			
United World Enterprises, LLC			
Firm/Company			
PO Box 15084			SECON SALLA
Address			JUN I
Brooksville, FL 34604			7 PN 2: 45 Y OF STATE EE, FLORIDA
· · · · · · · · · · · · · · · · · · ·			101 V.1S V.2S
City/State and Zip Code	2		ST. F
gio@unitedworldenterprises.com			•
E-mail address: (to be used for future a	annual report n	otification)	
For further information concerning this matt	er, please call:	:	
John LoCascio	305	710-9241	
Name of Person		Area Code & Daytime Teleph	one 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	ing amount:		
☑ \$25 Filing Fee	C	1 \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

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.

l, Na	me of the limited liability company: United World	Enterp	rises	s, LLC
2. (a)		(b)	
.,.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	<i>,</i>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	14309 Barracuda Run		PC	D Box 15804
	Spring Hill, FL 34609	_	Bro	ooksville, FL 34604
	September 1, 2015		L15	000153495
3.	Date of filing/registration in Florida	4.		Document number
(b) <u>.</u>	Outling 1200 rain	33545	2	FILE TO JUN 17 SECRETARY OF TALLAHASSEE
	Spring Hill FL	34609		
signate I hereb provision the oblint to mere notified	mited liability company is not organized under the law nige or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of the office of organization or the operating agreement of the are of a member or authorized representative of a member by accept the appointment as registered agent and agreement of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the first change.	vs of the the registability confitted limited limited length	stered ompar ited I iabili n Lo	d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company. Cascio Printed or typed name of signee

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00