## L16000098759

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HAY 26 PH 2: 56

## **COVER LETTER**

	stration Section sion of Corporations					
SUBJECT:	Unihouse, LLC					
	Name of Limited Liability Company					
Dear Sir or M	Aadam:					
The enclosed	Registered Agent/Registered Of	ffice Change and f	ec(s) are submitted for filing.			
Please return	all correspondence concerning t	his matter to the fo	ollowing:			
Oleg Sokolov						
	Name of Person		_			
Unihouse, LL	С					
	Firm/Company		_			
17 Pythian Pla	acc					
	Address		_			
Palm Coast, F	L 32164					
	City/State and Zip Code		_			
001@olso.us						
E-mail	address: (to be used for future an	mual report notific	ation)			
For further in	nformation concerning this matte	r, please call:				
Oleg Sokolov		386 at (	237-4333			
	Name of Person		Area Code & Daytime Telephone Number			
Regi Divi P.O.	ling Address: stration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

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. N	ame of the limited liability company: Unihouse, LLC				
2. (a)	Unihouse, LLC	(b) Unihouse, LLC			
. (/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	17 Pythian Place		P.O.BOX	350112	
	Palm Coast, FL 32164		PALM C	M COAST, FL 32135	
	5/20/2016		L16000098	8759	
3.	Date of filing/registration in Florida	— 4.	-	Document number	
5. (a)					
J. (a)	Registered Agent and Registered Office shown on the records of	f the Flori	da Dept. of Sta	 Rtc:	
	Sokolov, Oleg				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	 SS)	<u> </u>	
	17 Pythian Place			S 28	
	Palm Coast F1	32164		FILED 2022 MAY 26 PH 2: SEURE FARY OF STALLAHAS SEE.	
		L.,		N games	
(b)				ASSS. TO THE	
	Enter name of NEW Registered Agent and/or NEW Registered	d Office :	iddress:	- v.c. <b>2</b>	
	Palmetto Charter Services, Inc.			2: 56 E.FL	
	NEW Registered Office Address:				
	149 S. Ridgewood Avenue			_	
	Daytona Beach	32114			
		L		_	
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- cre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	e registe lability c of the li	red office ar company, it : mited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
			0/20	Sakalar Her	
Signa	ture of a member or authorized representative of a member		- 1 - 3 -	Printed or typed name of signee	
I herei provisi the obl to mere patifica	by accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I in writing of this change.	ree to ac perforn ed for in hereby c	et in this cap nance of my Chapter 60, confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
Signatu	re of Registered Agent				