Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Frnail	Address:			
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LLC REGISTERED AGENT CHANGE UNIGLASS L.L.C.

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COVER LETTER

•	COVERLETTER			
TO: Registration Section Division of Corporations				
SUBJECT: UNIGLASS L.L.				
Nai	me of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.			
Please return all correspondence concerning th	nis matter to the following:			
Mary Castillo				
Name of Person				
Registered Agent Solutions, Inc.				
Firm/Company				
5301 Southwest Pkwy, Suite 400				
Address				
Austin, Texas 78735				
City/State and Zip Code				
E-mail address: (to be used for future and	nual report notification)			
For further information concerning this matter.	, please call:			
Mary Castillo	at (888 705-7274			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314			
Enclosed is a check for the following	amount:			
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

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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

rioria	<i>t</i> ,				
l. Na	me of the limited liability company: _UNIGLA	SS L.L	C.		
2. (a)	601 BRICKELL KEY DRIVE SUITE 6	06 /	(b) 601 BRICKELL KEY DRIVE SUITE 606		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(1	"/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	700		700		
	MIAMI, FL 33131	<u> </u>	MIAM	I, FL 33131	
3.	Date of Elizabeth size of the Elizabeth	– .			
3.	Date of filing/registration in Florida Pagintrated Agent Calutions Inc.	4.		Document number	
5. (a)	Registrated Agent Solutions, Inc			-	
	Registered Agent and Registered Office shown on the records of 155 PLAZA DR SUITE A	e:			
	Registered Office Address (MUST BE FLORIDA STREET	-			
	TALLAHASSEE	_L 3230	1	-	
(b)	Registered Agent Solutions, Inc.			; ~a	
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office ade	dress:		
	2894 Remington Green Ln.) -	
	NEW Registered Office Address:			•	
	Ste. A			· = = = = = = = = = = = = = = = = = = =	
	Tallahassee	L_32308		. ω : ω : ω	
the char agent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the regis iability co of the lim	tered office mpany, it is ited liabilit	c and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
/s/	Mackenzie Hibler		Macke	enzie Hibler, Authorized Person	
Signatu	are of a member or authorized representative of a member			Printed or typed name of signee	

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 bischange.

Mackenzie Hibler, Assistant Secretary

Signature of Registered Agent