L19000 112687

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I ALBRITTON

COVER LETTER

Division of Corporations						
SUBJECT: United World Care LLC Name of Limited Liability Company	-					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Roman V Chase Name of Person						
United world Care LL-C Firm/Company						
508 SW10th street						
Hallondale Beach, FL 33009 City/State and Zip Code						
My United World Care Co Granticom E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Roman Chase at 305, 901-2660 Name of Person Area Code & Daytime Telephone Numb	– ær					
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 & 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.

Florida	.			
1. Na	me of the limited liability company: Unite	ed Wo	rld Care	LLC
2. (a)	300 SW 22 nd Street	<u>_</u> (b)_3	300 SW 3	and st
	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		-	limited liability company:
	Suite F		Suite: F	_
	Fort Lauderdals FL, 2			deroble, FL
	April 25, 2019		L190001	3331
3.	Date of filing/registration in Florida	- _{4.}	Document nu	
5 (a)	Krystle J Cahill	Title	1 ~	
5. (a)	Registered Agent and Registered Office shown on the records of		 _	
	300 SW 22nd Str	=		
	Registered Office Address MUST BE FLORIDA STREET			.
	T 1 1 1 date	200		52
	tort Laudercale, FI	333	<u> 315</u>	
(b)	Roman V. Chase			8: ₁
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		O)
			-	
	508 SW 10th Street			
	NEW Registered Office Address:			
	Suite: I			
	11 11			
	Hallandale Beach, FI	<u>. 33(</u>	<u> 209</u>	
If the li	mited liability company is not organized under the law	ve of the State	of Florida, it is been	by confirmed that offer
the cha	nge or changes are made, the Florida street address of	the registered	office and the busing	ess office of the registered
Was/We	vill be identical. Or, in the case of a Florida limited limited authorized by an affirmative vote of the members of	of the limited 1	iability company or a	med that the change(s) s otherwise provided in
the arti	cles of organization or the operating agreement of the			01.11
Signat	we of a member or suthorized representative of a member		rystle J Printed or typed	(ahill
=	-			<u>-</u>
r neret provisi the obli to mere	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I	ree to act in the performance of d for in Chapt hereby confirm	is capacity. I further of my duties, and I ar er 605, F.S. Or, if th n that the limited lial	agree to comply with the n familiar with and accept is document is being filed vility company has been

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

Signature of Registered Agent