



Division of Corporations Electronic Filing Cover Sheet

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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.

	Address:			
rmalli	Andress:			

LLC REGISTERED AGENT CHANGE UNITED REAL ESTATE FORT LAUDERDALE ASSOCIATES,

Certificate of Status 0 0 Certified Copy 02 Page Count \$25.00 Estimated Charge

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Help

INHS18 (2/14)

COVER LETTER

	gistration Section vision of Corporations					
SUBJECT	United Real Estate	Fort Lauderdale Associates, LLC				
,		ne of Limited Liability Company				
Dear Sir or	Madam:					
The enclose	ed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.				
Please retu	m all correspondence concerning th	is matter to the following:				
Zacha	ary Ysais					
	Name of Person					
Registere	ed Agent Solutions, Inc.					
	Firm/Company					
1701 Dire	ectors Blvd, Suite 300					
	Address					
Austin, T	X 78744					
	City/State and Zip Code					
E-ma	il address: (to be used for future and	ual report notification)				
For further	information concerning this matter	please call:				
Zacha	ary Ysais	888 705-7274				
	Name of Person	Area Code & Daytime Telephone Number				
Re Div Cli 260	REET/COURIER ADDRESS: gistration Section vision of Corporations fton Building 61 Executive Center Circle llahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
En	losed is a check for the following amount:					
ם:	\$25 Filing Fee	S55 Filing Fee & Certified Copy				

1512**9**570210

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.

I. N	ame of the limited liability company: United Rea	al Esta	ate Fort L	_auderdale Ass	ociates, LLC	
2. (a)	2820 NW BARRY ROAD		(b) 2820 NW BARRY ROAD			
2. (u)	Principal office address of limited hability company:		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	(<u>Note: MUST BE STREET ADDRESS</u>)		KVVIC	AS CITY, MC		
	KANSAS CITY, MO 64154				7 04 104	
	9/19/2019		L19000	0237768		
3.	Date of filing/registration in Florida	4,		Document number		
5. (a)	C T CORPORATION SYSTEM					
.z. (a)	Registered Agent and Registered Office shown on the records o	f the Flori	da Dept, of Stat	te:		
	1200 SOUTH PINE ISLAND RO	AD		V.s.	- 21	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE,	227	- · · ·	FILED 2021 DEC 16 PM 1: 37 SECTION ASSEE, TLORIDA TALLEMASSEE, TLORIDA	
				_	空 B	
	PLANTATION ,	, <mark>333</mark> :	24		FILED PILED	
				_	EEE PR	
(b)	Registered Agent Solutions, Inc.			_	T ST	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	<u>d Office s</u>	ddress:		RED 37	
	155 Office Plaza Dr.				T	
	NEW Registered Office Address:	_				
	Suite A			_		
	Tallahassee _{. f}	_ 323	01	_		
the cha agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited la tere authorized by an affirmative vote of the members ficles of organization or the operating agreement of the	of the reg liability of the li	gistered offic company, it i mited liabilit	e and the business of is hereby confirmed t ty company or as oth-	fice of the registered hat the change(s)	
	essica Barnard	J€	ssica Barr		thorized Person	
•	ature of a member or authorized representative of a member			Printed or typed name		
provis the ob to mer	the accept the appointment as registered agent and agions of all statutes relative to the proper and complet ligations of my position as registered agent as provided by reflect a change in the registered office address, and in writing of this change. Mackenzie Hart, Asst. Secretary	e pertor.	mance of my	annes, and Lam Jam	unar wun ana accept	
Signan	ure of Registered Agent					