## 1114000009059

|   | (Requestor's Name)       |  |  |
|---|--------------------------|--|--|
|   | (Address)                |  |  |
|   | (Address)                |  |  |
|   |                          |  |  |
|   | (City/State/Zip/Phone #) |  |  |
| PICK-UF                                 | MAIL MAIL                |  |  |
|   | (Business Entity Name)   |  |  |
|   | (Cashioso Zharj Namo)    |  |  |
| (Document Number)                       |                          |  |  |
| Certified Copies                        | Certificates of Status   |  |  |
| Special Instructions to Filing Officer: |                          |  |  |
|   |                          |  |  |
|   |                          |  |  |
|   |                          |  |  |
|   |                          |  |  |
| <u> </u>                                |                          |  |  |

Office Use Only



400272758624

400272756624 05/19/15--01014--002 \*\*35.00

15 JUN 11 PM 12: 15

SECRETARY OF STATE TALLAH (SSEE, FLORIDA

JUN 16 2015 Y CANNON



May 27, 2015

CATHERINE FAUGHNAN UNITED GLOBAL LAW GROUP, LLC 7948 BAYMEADOWS WAY, 3RD FLOOR JACKSONVILLE, FL 32256 US

SUBJECT: UNITED GLOBAL LAW GROUP LLC

Ref. Number: M14000009059

We have received your document for UNITED GLOBAL LAW GROUP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Cannon Regulatory Specialist II

Letter Number: 115A00011120



## **COVER LETTER**

**7** }

| TO: Registration Section Division of Corporations   |  |  |  |
|---|--|--|--|
| SUBJECT: United GlobalLaw Group, LLC Name of Limited Liability Company  |  |  |  |
| 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:   |  |  |  |
| Catherine Faughnan Name of Person   |  |  |  |
| United Global Law Group, LLC Firm/Company   |  |  |  |
| 7948 Baymeadows Way, 3rd Floor Address  |  |  |  |
| Joeksonville, Floride 32256 City/State and Zip Code   |  |  |  |
| K faughnan eunited globallaw. Com E-mail address: (to be used for future annual report notification)  |  |  |  |
| For further information concerning this matter, please call:  |  |  |  |
| Catherine Faughnen at (888) 426-6080 ext 300  Name of Person Area Code & Daytime Telephone 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 amount:   |  |  |  |
| □ \$25 Filing Fee  □ \$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.

| 1. Name of the limited liability company: United Chobal Law   | Group, LLC   |
|---|--|
| 2 (a) 7960 Bey meadows, Suite 1000 (b)  | Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  |
| 0 1   | Document number  |
| Registered Agent and Registered Office shown on the records of the Florida Dept. of State  7960 Baymeadows Way  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  Suife 1000  | -  |
| (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  | SECRETARY OF<br>TALL AHASSEE.  |
| NEW Registered Office Address: 17948 Boymen dows Way, 318 Floor   | PHI2: 15   |
| If the limited liability company is not organized under the laws of the State of Flothe change or changes are made, the Florida street address of the registered office agent will be identical. Or, in the case of a Florida limited liability company, it is was/were authorized by an affirmative vote of the members of the limited liability the articles of organization or the operating agreement of the limited liability company and signature of a member or authorized representative of a member.  I hereby accept the appointment as registered agent and agree to act in this cap provisions of all statutes relative to the proper and complete performance of my the applications of my position as registered agent as provided for in Chapter 602 to the prefect a change in the registered office address. I hereby confirm that notified in writing office in the registered office address. I hereby confirm that signature of Registered Agent.  Division of Corporations • P.O. Box 6327 • Tallaham | e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in a nearly.  Printed or typed name of signee  acity. I further agree to comply with the duties, and I am familiar with and accept to the limited liability company has been |
| FILING FEE: \$25.00   | •  |