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UNISEARCH, INC.





8/25/2021

SECRETARY OF STATE OF FLORIDA DIVISION OF CORPORATIONS THE CENTRE OF TALLAHASSEE 2415 NORTH MONROE SUITE 810 TALLHASSEE, FL 32303

RE: Unisearch Change of Address

To Whom it May Concern:

Enclosed please find the applications to change the registered agent address on behalf of Unisearch, Inc. for entities that have appointed Unisearch as agent. (More applications will be forwarded in a separate package for the remaining entities). Also enclosed is check # 1043 for \$3,760. Should you have any questions, please contact me at the below number.

Thank you,

oelle Churik

Unisearch, Inc.

1990 Main Street, Suite 750-709

Sarasota, FL 34236

888-617-4478

joelle.churik@unisearch.com

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.

(a)	5101 NE 82ND AVE, SUITE 200	(b)	01 NE 82ND AVE, SUITE 200
/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	VANCOUVER, WA 98662	VA	ANCOUVER, WA 98662
	02/28/2018	MIS	8000002057
	Date of filing/registration in Florida	4.	Document number
(a)	UNISEARCH, INC.		
	Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta 155 OFFICE PLAZA DRIVE Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		n, of State:
	TALLAHASSEE, F	L ³²³⁰¹	
b)	UNISEARCH, INC.		2021 S SSCR TAL
	Enter name of NEW Registered Agent and/or NEW Registere	d Office addres	EVENT SE
	1990 MAIN STREET		
	NEW Registered Office Address:		
	SUITE 750-709		
	SARASOTA . F	L	
noe	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members icles of organization or the operating agreement of the	iws of the Star e registered o iability compa of the limited	flice and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided i
it v /wa	•		
nt v /wo arti	ture of a member or authorized representative of a member		Printed or typed name of signee

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

INTEGRAÇÃO