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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : I20160000086 Phone : (561)508-5033 Fax Number : (561)694-1639

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LLC REGISTERED AGENT CHANGE **USATESTPREP, LLC**

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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.

1. N	ame of the limited liability company: USATestprep,				
2. (a)	400 GALLERIA PKWY SE STE 100	(b) 400 GAI	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	, , , , , , , , , , , , , , , , , , ,			
	ATLANTA, GA 30339	AT: 4817			
	7772 4777, 427 50005	ATLANT	A, GA 30339		
	04/11/2019	M190000	03703		
3.	Date of filing/registration in Florida	4.	Document number	2019	
5. (a)	C T CORPORATION SYSTEM		<u> </u>	و ب	
	Registered Agent and Registered Office shown on the records of the	Florida Dept of State	;		
	1200 SOUTH PINE ISLAND ROAD			· 그 문장	
	Registered Office Address (MUST BE FLORIDA STREET AD	DRESS)	• •	· _ 55	
			-:	• 731 5-3	
	PLANTATION 3.	3324	 ,	. 72	
	, FL			CA	
(0)	United Agent Group Inc.				
	Enter name of NEW Registered Agent and/or NEW Registered Of	Mice address:			
	11380 Prosperity Farms Road #221E				
	NEW Registered Office Address:				
	Palm Beach Gardens FL	33410			
F.1 41					
i ine ij he chai	mited liability company is not organized under the laws age or changes are made, the Florida street address of the	of the State of Flor	rida, it is hereby confirm	ned that after	
жені м	in be identical. Of, in the case of a Florida limited light	lify company if ie	hereby confirmed that the	ha chongo(c)	
vas/wc	re authorized by an affirmative vote of the members of the seles of organization or the operating agreement of the lin	he limited liability	company of ac athansis	se provided in	
	The state of the s	_	, Attorney-in-Fact		
Signan	are of a member or authorized representative of a member		Printed or typed name of sign	530	
hereb rovisio ne obli o mere otifical	y accept the appointment as registered agent and agree ins of all statutes relative to the proper and complete per gations of my position as registered agent as provided for reflect a change in the registered office address, I her in writing of his change.				
15	Ryan Sullivan, Special Secretary				