N15000002001

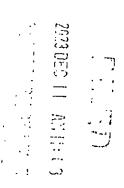
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Certified Copies Certificates of Status		
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Special instructions to	rilling Officer.	





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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Unico Highland Beach Chapter, Inc.
2. The principal office address: 335 East Linton Blvd., Ste. B-14, Delray Beach, FL 33483
3. The mailing address (if different): 3740 S. Ocean Blud., Apt. 509, Highland Beach, FL 33487
4. Date of incorporation/qualification: Document number: N150000 2001
 The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Kristine M. Chapman, P.A.
2500 N. Military Trail, Ste. 240
Boca Ration, FL 33431
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Frank LoRe
3740 S. Ocean Blud., Apt. 509 P.O. Hov. NOT acceptable
Highland Beach, FL 33487
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
as changed will be identical. Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the floard, or the corporation has been notified in writing of the change.
Lisa Marie Conte Brown Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.
Frank to the fr. 1/19/2023
If signing on behalf of an entity: Frank Loke T. Typed or Printed Name

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04-13)