

N93 DDDDD03051

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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HALL COUNTY, GEORGIA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: URBAN CORE ENTERPRISES, INC.

Name of Corporation

DOCUMENT NUMBER: N93000003051

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BARBARA G. SWEET

Name of Contact Person

CROSSLAND TITLE SERVICES, LLC

Firm/Company

1563 ALFORD PLACE STE 1

Address

JACKSONVILLE FL 32207

City/State and Zip Code

bsweet@crosslandtitle.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara G. Sweet

Name of Contact Person

at (**904**) **858-9501**

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: Urban Core Enterprises, Inc.

2. The principal office address: 4150 Ribault River Lane
Jacksonville FL 32208

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/07/1993 Document number: N93000003051

5. 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)

Darryl R Jackson
101 E. Union Street Ste 400
Jacksonville FL 32202

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Louise Vileno
2399 Myrtle Avenue North
P.O. Box NOT acceptable
Jacksonville FL 32209

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, 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 board, or the corporation has been notified in writing of the change.

Gladys Nelson
Signature of an officer or director

Gladys Nelson
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.

Louise Vileno
Signature of Registered Agent

March 25, 2016
Date

If signing on behalf of an entity:

Louise Vileno
Typed or Printed Name

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