

MAY-18-2006 THU 01:26 PM

FAX 0.

P. 01/06

Division of Corporations

Page 1 of 1

P03000134868

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000137848 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 205-0380

From:
Account Name : BATTAGLIA ROSS CORPORATE
Account Number : I20000000275
Phone : (727) 381-2300
Fax Number : (727) 343-4059

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

06 MAY 18 AM 10:12

FILED

RECEIVED

06 MAY 18 AM 8:00

DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

UNITED UNION MEMBER BENEFITS ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Handwritten: 5-18-06

5/18/2006

MAY-18-2006 THU 01:26 PM

FAX NO.

P. 02/06

MAY 18 06 10:18a

H06000137848 3

**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: United Union Member Benefits Association, Inc.
2. The principal office address: 420 McGarity Drive
McDonough, GA 30252 US
3. The mailing address (if different): PO Box 59
Griffin, GA 30224 US
4. Date of incorporation/qualification: 11-17-2003 Document number: P03000134868
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation Systems
1200 South Pine Island Road
Plantation, FL 33324

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

Joseph Sansonetti
10935 SW 186th Circle
(P.O. Box NOT acceptable)
Dunnellon, FL 34432

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.

 Joseph Sansonetti, Director, President
(Signature of officer or director) (Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, 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.

 May 18, 2006
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

Joseph Sansonetti
(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 (8/05)

H06000137848 3