P10000003978

(Requestor's Name)
(Address)
(Address)
, , , , ,
· (City/State/Zip/Phone #)
(Only Outor Liph Hono W)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:
<u>.</u>
·

Office Use Only



000183624910

07/26/10--01010--014 **35.00



Bar/son

COVER LETTER

Division of Corporations				
SUBJECT:	Universal Underst	anding, Inc.		
	Name of Co	rporation		
DOCUMENT NUMBER	:P100	00003978	,	
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:				
John G. Metzger				
John G. Metzger Name of Contact Person				
Universal Understanding, Inc.				
	Firm/Co	mpany		
200 W. Forsyth Street, Suite C-900				
	Addı	ess		
Jacksonville, Florida 32202 City/State and Zip Code				
Chyrstate and Zip Code				
john.metzger@uu-inc.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
lata a	Makena	004	000 5504	
	Metzger ontact Person	at (904) Area Code & Davi	309-5501 time Telephone Number	
ranio oi c	ontaot i dibon	11100 0000 00 220,		
Enclosed is a \$35.00 check made payable to the Department of State.				
<u>N</u>	Iailing Address: mendment Section	Street Address Amendment S	S:	
		Amendment S Division of C		
	Division of Corporations CO. Box 6327	Clifton Build	•	
	allahassee, FL 32314		ve Center Circle	
•		Tallahassee,		

TO:

Amendment Section

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: Universal Understanding Inc
2. The principal office address: 200 W. Forsyth Street, Suite C-900, Jacksonville, Florida 32202
3. The mailing address (if different):
4. Date of incorporation/qualification: 01-14-2010 Document number: P10000003978
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)
Metzger, John G., President
325 E. Church Street
Jacksonville, Florida 32202
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Metzger, John G., President
200 W. Forsyth Street, Suite C-900
P.O. Box NOT acceptable
Jacksonville, Florida 32202
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.
John G. Metzger, President
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.
Signature of Registered Agent Date
If signing on behalf of an entity:
John G. Metzger
Typed or Printed Name

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