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UNVISION OF CORPORATIONS
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Universa Medical Su Name of Corpora	pply, Inc
DOCUMENT NUMBER: P110000	040812
The enclosed Statement of Change of Registered Office/Age	
Please return all correspondence concerning this matter to the	e following:
William G. We	
Name of Contact I	Person
Universa Medical S Firm/Compan	
,	~
221 Hartwig C	Court
Address	
Orlando, Florida City/State and Zip	32824 Code
City/State and Zip	Code
bwebster@measolut	ions.com
E-mail address: (to be used for future	annual report notification)
•	
For further information concerning this matter, please call:	
William G. Webster at (	407 ) 758-1976
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department	of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rt to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Universa Medical Supply, Inc.
2. The principal	office address: 221 Hartwig Court, Orlando FL 32824
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 4-27-2011 Document number: P11000040812
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Corporation Service Co.
	1201 Hays Street
	Tallahasse, Fl 32301
6. The name and (if changed):	1201 Hays Street  Tallahasse, FI 32301  I street address of the new registered agent (if changed) and /or registered office  Mr. William G. Webster
	Mr. William G. Webster
	221 Hartwig Court
	P.O. Box NOT acceptable
	Orlando, Florida 32824
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatur	William G Webster Frinted or typed name and title
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of a statute of a statute of the proper and complete performance of a statute of the proper and complete performance of a statute of the proper and complete performance of the proper and complete performa
William	half of an entity:  C. Webster  yped or Printed Name

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