

P120000085429

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

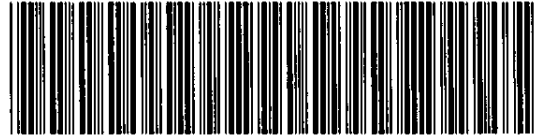
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC -3 PM 3:58

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@ 12/3/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VVS- Service Inc
Name of Corporation

DOCUMENT NUMBER: P 120000 85429

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:

Nasonov Vladimir
Name of Contact Person

VVS- Service Inc
Firm/Company

205 NE 12 Ave apt 1
Address

Hallandale Beach, FL 33009
City/State and Zip Code

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

For further information concerning this matter, please call:

V. Nasonov at (x 786) 853-7142
Name of Contact Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 20, 2012

VLADIMOR Y. NASONOV
VVS-SERVICE INC
205 NE 12 AVE - APT 1
HALLANDALE BEACH, FL 33009

SUBJECT: VVS-SERVICE INC
Ref. Number: P12000085429

We have received your document for VVS-SERVICE INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 912A00027972

RECEIVED
12 DEC -3 AM 9:17
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: UUS- Service
2. The principal office address: 205 NE 12 Ave apt 1
Hallandale Beach, FL 33009
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10.09.12 Document number: P-120000 85429
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)

Aizman Frida
2101 Atlantic Shores Blvd #403
Hallandale, FL 33009

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

Vladimir Nasonov
205 NE 12 Ave apt 1
P.O. Box NOT acceptable
Hallandale Beach, FL 33009

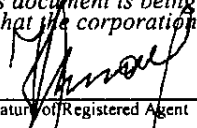
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

Signature of an officer or director

President
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.


Signature of Registered Agent

11/29/2012
Date

If signing on behalf of an entity:

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 (03/12)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC -3 PM 3:50