P13000102305

(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: United Consulting Group, Inc.			
DOCUMENT NUMBER: P13000102305			
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:			
MRS. DORIS CONZAICZ Name of Contact Person			
Unizer Consulting Group, Inc.			
1538 NW 159 Are			
Pembrola Pines Fz 33028			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call: DORIS GONZALCZ at (97), SWI 691			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			
Tallahassee, FL 32301			

CR2E045 (03/12)

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Unizen Consulting Group, Inc.
2. The principal office address: 1538 NW 159 Are
Pembroke Pines FL 33028
3. The mailing address (if different):
4. Date of incorporation/qualification: 12 29 13 Document number: P13000102305
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)
Mrs. Doris Gonzalez
1538 NW 159 tre
Pembrola Pines, Fi 33028.
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Blanca R. Sordo ESQ.
7300 NORTH-Rendall Drive safe 38
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 abofficer or director DORIS GONZALLE CEO 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 1-28-14 Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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