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	Address:		
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	Fax Number	: (561)214-8442	
	Phone	: (561)694-8107	
	Account Number	: 110432003053	
	Account Name	: CORPORATE CREATIONS INT	ERNATIONAL INC.
From:			
•	ray Ammer	: (850)617-6380	
	Division of Co		
To:			

REGISTERED AGENT CHANGE UNION SITI INC

Certificate of Status	0
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MAR 2 4 2021

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Corporate Filing Menu

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

Pursuant to the statement of ch	e provisions of sections 607.0502, 617.0 ange is submitted for a corporation org	502, 607.1508, or 617.1508, Florida vanized under the laws of the State of	<i>Statutes</i> Florida	, this	
in ord	er to change its registered office or reg	istered agent, or both, in the State of i	Florida.		_
l. The name of	the corporation; Union Siti Inc				
2. The principa	l office address: 3750 W 16 AVE #100 H	IALEAH, FL 33012			
3. The mailing	address (if different):		·-		_
4. Date of incorporation/qualification; 10/11/2012 Document number: P1400007					
5. The name an Florida Depa	d street address of the current registered runent of State: (If resigned, enter resig	agent and registered office on file wined)	th the		
	Barroso , Yamel				
	3750 W 16 AVE #100HIALEAH, FL 33	012			
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or registered off	ice		
	Corporate Creations Network Inc.				
	801 US Highway 1		· .		
	P.O. B North Palm Beach, FL 33408	ox NOT acceptable		7.23	
			الت: ت		nt;==
Such change wa authorized by th	is authorized by resolution duly adopte board, or the corporation has been n	ed by its board of directors or by an o otified in writing of the change.	in contraction of the contractio	° 7	
III Signatui	e of an officer or director	Marie Heitzman, Attorney-In-Fact			_
I hereby accept I further agree t of my duties, an document is beit corporation has	the appointment as registered agent as o comply with the provisions of all sta d I am familiar with and accept the ob ng filed merely to reflect a change in to been notified in writing of this change	nd agree to act in this capacity. tutes relative to the proper and complication of my position as registered the registered office address, I hereby	plete per agent. confin	rforman Or, if th m that th	ice iis he
()		03/22/2021			
_	ature of Registered Agent	Date			•
If signing on bel	nalf of an entity:				
Cierra Mims, Spe					
Ту	ped or Printed Name				

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

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