

PIH 0000844 22

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

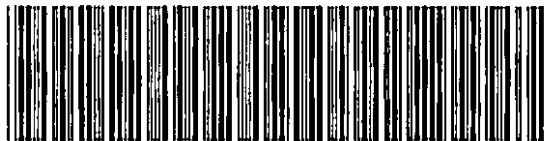
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200392325312

08/15/22--01011--023 ♦♦35.00

FILED

2022 AUG 15 PM 12:05

SECRETARY OF STATE  
TALLAHASSEE, FL

12/5/2022

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: UNITYFAM 1001 CORP.  
Name of Corporation

DOCUMENT NUMBER: P14000084422

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:

Luis E. Suarez, Esq.

Name of Contact Person

Heise Suarez Melville, PA

Firm/Company

2990 Ponce de Leon Boulevard, Suite 300

Address

Coral Gables, FL 33134

City/State and Zip Code

lsuarez@hsmpr.com

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

For further information concerning this matter, please call:

Luis E. Suarez, Esq.

Name of Contact Person

at (305)

800-4476

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: UNITYFAM 1001 CORP.
2. The principal office address: 19213 NW 24th Ct, Pembroke Pines, FL 33029
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/31/2014 Document number: P14000084422
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)

Horacio Sosa  
2924 Davie Rd., Suite 102  
Davie, FL 33314

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

Heise Suarez Melville, PA  
2990 Ponce de Leon Boulevard, Suite 300  
Coral Gables, FL 33134

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.

Adriana Santander  
Signature of an officer or director

Adriana Santander  
Printed or typed name and title  
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]  
Signature of Registered Agent

8/10/22  
Date

If signing on behalf of an entity:

Luis Super  
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  
CR2B045 (04/13)

SECRETARY OF STATE  
TALLAHASSEE, FL

2022 AUG 15 PM 12:05

FILED