

P 15000030860

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

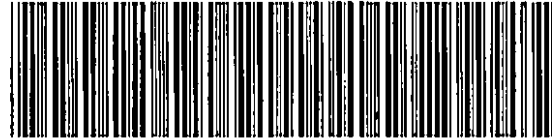
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000305765160

11/20/17--01013--018 **35.00

FILED
2017 NOV 20 AM 11:51
TAL...

C. GOLDEN
NOV 21 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Universal D Group
Name of Corporation

DOCUMENT NUMBER: D15000030860

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:

Gabriela Manrique
Name of Contact Person

Universal D Group
Firm/Company

12800 SW 8th St
Address

Miami, FL - 33184
City/State and Zip Code

universal dental group.gaby@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gabriela Manrique at (786) 414-4316
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

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: Universal D Group Inc
2. The principal office address: 12800 SW 8th St, Miami, FL-33184

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/3/2015 Document number: P15000030860

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)

Juane Gonzalez (Resigned)
12800 SW 8th St
Miami, FL-33184

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

Gabriela A. Manrique
12800 SW 8th St
Miami, FL-33184

P.O. Box NOT acceptable

FILED
2017 NOV 20 AM 11:51

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]
Signature of an officer or director

Olga Bowen (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]
Signature of Registered Agent

11/12/2017
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