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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (813)436-5206

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## REGISTERED AGENT CHANGE UNITED CONSTRUCTORS INC.

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

statement of cha	nge is submitted for a corporation organ	2, 607,1508, or 617,1508, Florida Statutes ized under the laws of the State of <mark>Florida</mark> red agent, or both, in the State of Florida.	
	the corporation: UNITED CONSTRUCTO		
3. The mailing a	ddress (if different):		
4. Date of incor	poration/qualification: 04/16/2018	Document number: P18000037325	
5. The name and	I street address of the current registered ag timent of State: (If resigned, enter resigned	gent and registered office on file with the	
	PANDO, JOHN		
	15050 Elderberry Lane Suite 6V29		
	Fort Myers, FL 33907		
6. The name and (if changed):	street address of the new registered agen	t (if changed) and /or registered office	<b>3</b> t
	REGISTERED AGENTS INC		<u> </u>
	7901 4TH ST N STE 300		
	P.O. Box	NOF acceptable	
	ST. PETERSBURG, FL 33702		7.08
The street addre	ess of its registered office and the street a be identical.	address of the business office of its regist	ered agent,
		by its board of directors or by an officer ified in writing of the change.	so
Rutai	to of an omeof or director	Robin Jones, filing incorporator	
Signatu	re of an omed or director	Printed or Typed name and title	
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and comply with the provisions of all statud I am familiar with and accept the obling filed merely to reflect a change in the been notified in writing of this change.	l agree to act in this capacity, tes relative to the proper and complete p gation of my position as registered agent registered office address, I hereby confi	performance Or, if this irm that the
1 David	Kebertis	11/11/2024	
Sig	miore of Registered Agent	Date	
If signing on be	half of an entity:		
David Roberts			
T	eped or Printed Name		
	* * * FILING FE	E: \$35.00 * * *	