

4/25/2013 10:10:25 From: To: (850) 617-6380

( 1/3 )

Division of Corporations

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P40440

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : PCA000000003  
Phone : (352) 222-1692  
Fax Number : (850) 878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

REGISTERED AGENT CHANGE  
UV SALES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED

13 APR 25 AM 11:17

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
13 APR 25 PM 1:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4/26/13

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** UV Sales, Inc.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** P40440

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:

Peter F. Souza

\_\_\_\_\_  
Name of Contact Person

NRAI Corporate Services

\_\_\_\_\_  
Firm/Company

1200 S. Pine Island Road, Suite 250

\_\_\_\_\_  
Address

Plantation, FL 33324

\_\_\_\_\_  
City/State and Zip Code

ysasso@izonegroup.com

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

For further information concerning this matter, please call:

Peter F. Souza

877

261-6823

\_\_\_\_\_  
Name of Contact Person

at (

\_\_\_\_\_) \_\_\_\_\_  
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

CR3E045 (03/12)

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**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 New Jersey in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: UV Sales, Inc.
2. The principal office address: 24 Link Drive, Rockleigh, NJ 07647
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/04/1992 Document number: P40440
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)  
Corporation Service Company  
1201 Hays Street  
Tallahassee, FL 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
NRAI Services, Inc.  
1200 South Pine Island Road  
Plantation, FL 33324  
P.O. Box NOT acceptable

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 an officer or director

Yasunori Sasao, Assistant Secretary  
 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.

By:   
 Signature of Registered Agent

4/25/2013  
 Date

If signing on behalf of an entity:

Peter F. Souza, Assistant Secretary  
 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  
 CR2E045 (03/12)

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