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5/9/2008

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## **COVER LETTER**

To:	Amendment Section	
	Division of Corporations	

SUBJECT:	Unique Programs, Inc.
	Name of Corporation)
DOCUMENT NUMBER:	P94000078592
The enclosed Statement of Change of Please return all correspondence conc	Registered Office/Agent and fee are submitted for filing. erning this matter to the following:
	Celeste Perrino
(	Name of Contact Person)
	Bush Ross, P.A.
	(Firm/Company)
	1801 North Highland Avenue
	(Address)
	Tampa, Florida 33602
· (C	City/State and Zip Code)
For further information concerning the	is matter, please call:
Celeste Perrino	at ( <u>813</u> ) <u>204-6425</u>
(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
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (8/05)

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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, 617.1508, 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.

I. The name of the corporation:	Unique Programs, Inc.
2. The principal office address:	12363 Hampton Park Blvd., Tampa, FL 33624
3. The mailing address (if different):	P. O. Box-20941, Tampa, FL 33622
4. Date of incorporation/qualification:	10/24/1994 Document number: P94000078592
5. The name and street address of the cur Florida Department of State:	rrent registered agent and registered office on file with the
Randy K. Sterr	
220 S. Franklir	Street 2008 HAY 2008 HAY
Tampa, FL 33	602 <b> </b>
6. The name and street address of the ne (if changed):	w registered agent (if changed) and /or registered office
Bush Ross Reg	ristered Agent Services, LLC
1801 North His	shland Avenue CRIATE 133602 RIGHT 15
Tampa, Florida	133602 BH 5
The street address of its registered office as changed will be identical.	and the street address of the business office of its registered agent,
by the board, or the corporation has been	nduly adopted by its board of directors or by an officer so authorized notified in writing of the change, William W. Hollingsworth
(Signature of an officer or director	or) (Printed or typed name and title)
I further agree to comply with the provis of my duties, and I am familiar with and	Na 87008
If signing on behalf of an entity:	
Celegra Per(NO VIC (Typed or Printed Name)	<u>Are sout</u>
* *	* FILING FEE: \$35.00 * * *
	PAYABLE TO FLORIDA DEPARTMENT OF STATE PRPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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