1/20/22, 3:46 PM

Division of Corporations



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(((H22000026907 3)))



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Division of Corporations

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Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 : (214)317-4754 Fax Number

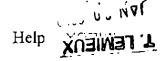
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LLC REGISTERED AGENT CHANGE UNION NEW AMERICAN IPCO, LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: Union New Am	erican IPC	O, LLC	(((H22000026907 3)))
7 (a)		(b)	
Σ. (Δ)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	`	·/	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	1314 North Westshore Boulevard, Soire 200		1311 Nor	th Westshore Boulevard, Suite 200
	Tampa, Fl., 33607	_	Tampa, F	L, 33607
	11/17/2020		L20000353	9990
3.	Date of filing/registration in Florida	4.		Document number
5 ()				
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept_of Sta	te.
	STAINTON, WILLIAM M			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	201 NORTH FRANKLIN STREET, STE. 2000			
	7.1401	33602		– 22
	TAMPA , F	L_33602		
				HILED JAN 20 PV
(b)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office a	ddress	20 E
	Little Halife of All Conference and On All C			골 [□]
	LEGALING CORPORATE SERVICES INC.			2T- 07
	NEW Registered Office Address			- SE 1
	5237 SUMMERLIN COMMONS BLVD. SUITE 400			
		-		
	FORT MYERS,	FL_33907		
chang agent was/w	limited liability company is not organized under the less or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	aws of the ne register liability c of the lin ne limited	ed office at ompany, it nited liabili	is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
Cian	Antonius Desisto ature of a member or authorized representative of a member	<u> </u>	tomus Desig	Printed or typed name of signee
I here provisi the ob- to me.	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and complet pligations of my position as registered agent as provid rely reflect a change in the registered office address, a led in writing of this change.	gree to ac e perforn led for in I hereby c	et in this cap nance of my Chapter 60 confirm that	pacity. I further agree to comply with the
			(((H22	2000026907 3)))
Signat	ure of Registered Agent			