

L16000155639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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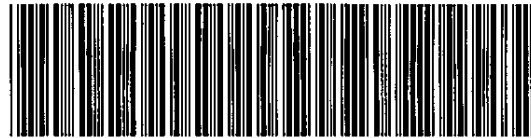
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
2016 SEP 26 A 11:24  
SECRETARY OF STATE

D. BRUCE  
SEP 27 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BOLICINE ITALIANE & MORE, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Martin Hofmann

Name of Person

The Victoria Law Group

Firm/Company

1200 Brickell Ave, Suite 1450

Address

Miami, FL 33131

City/State and Zip Code

info@thevictorialawgroup.com

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

For further information concerning this matter, please call:

Martin Hofmann

Name of Person

at ( 305 ) 602-9099

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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TALLAHASSEE FLORIDA

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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. Name of the limited liability company: BOLLICINE ITALIANE & MORE, LLC

2. (a) <u>Principal office address of limited liability company:</u> <i>(Note: MUST BE STREET ADDRESS)</i>	(b) <u>Mailing address of limited liability company:</u> <i>(Note: MAY BE POST OFFICE BOX)</i>
<u>1200 Brickell Ave., Suite 1450</u>	<u>1200 Brickell Ave., Suite 1450</u>
<u>Miami, FL 33131</u>	<u>Miami, FL 33131</u>

3. <u>08/19/2016</u>	4. <u>L16000155639</u>
Date of filing/registration in Florida	Document number

5. (a) ACCOUNTANT & MANAGEMENT INC.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
1549 NE 123RD ST  
NORTH MIAMI FL 33161

(b) Bob Arnold  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
The Victoria Law Group  
NEW Registered Office Address:  
1200 Brickell Ave., Suite 1450  
Miami FL 33131

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 2016 SEP 26 AM 11:20  
 TALLAHASSEE, FLORIDA  
 DEPARTMENT OF STATE

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

<u><i>Luca Uliana</i></u> Signature of a member or authorized representative of a member	<u>Luca Uliana</u> Printed or typed name of signer
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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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

*[Signature]*  
Signature of Registered Agent