## 118000150033

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## **COVER LETTER**

то:	Registration Section Division of Corporations					
SUBJ	BENCO BRASIL LLC					
,		ne of Limited	I Liability Company			
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Off	ice Change a	and fee(s) are submitted for filing.			
Please	return all correspondence concerning th	is matter to t	the following:			
FLA	/IA L. MAIA					
	Name of Person					
FLA	/IA MAIA LLC					
	Firm/Company		<del></del>			
1006	5 COSTA DEL SOL BLVD					
	Address	,				
DOR	AL, FL 33178					
	City/State and Zip Code					
maia	fla@hotmail.com					
<del></del> I	E-mail address: (to be used for future ann	ual report no	otification)			
For fu	rther information concerning this matter,	please call:		1	2818 NC	<b>62377</b> 7
Saul	Maia 🕹	786	760-3539	7. 2. 2.	NC V	
	Name of Person		Area Code & Daytime Telepho	ne Number	(a) 33	। <i>२</i> जु
	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		2H 1: 2	
	Enclosed is a check for the following	amount:				
	☑ \$25 Filing Fee	4	\$55 Filing Fee & Certified Copy			
INHST	8 (2/14)					

## 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.	Na	me of the limited liability company: BENCO BRAS	IL LLC	
2. (	a)	DARIO LEONARDO CONCA	(b)	
	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		1915 PURDY AVE	<del>-</del>	
		MIAMI BEACH, FL 33139		
		06/18/2018	L18000	150033
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	ALEX D. SIRULNIK, P.A		
•	( ,	Registered Agent and Registered Office shown on the records of the 2199 PONCE DE LEON BOULEVARD, SUIT	•	ate:
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)	_
		CORAL GABLES FL3	3139	
(	b)	FLAVIA L. MAIA		
		Enter name of NEW Registered Agent and/or NEW Registered O	Office address:	<del></del>
		10065 COSTA DEL SOL BLVD		- VON
		NEW Registered Office Address:		
			-	
		DORAL 53	3178	
		. FI. <u></u>		- : 5
the dager was	zha it w /we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of these of organization or the operating agreement of the liab	he registered offi fility company, it the limited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
	$\preceq$	re of a member or authorized representative of a member	SAUL MAIA	(DARIO CONCA LEONARDO)
Sip				Printed or typed name of signee
prov the e to m noti,	usia obli ere fica	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pegations of my position as registered agent as provided by reflect a change in the registered office address. The inwriting of this change.	e to act in this ca erformance of my for in Chapter 60 reby confirm tha	pacity. I further agree to comply with the valuties, and I am familiar with and accept 95, F.S. Or, if this document is being filed at the limited liability company has been
Sign	alur	SAUL MAA SM/DCL		
	,	Disidence Conservations II O. D.	/ 338 TE (I )	EL 2224