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PICK-UP	TIAW	MAIL
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> ZOID JUL 20 PM E: S. SECRETARY OF STATE

C. LEWIS

JUL 21 2010

EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: BI	P&G Enterprises, LLC	
 	f Limited Liability Company	
Dear Sir or Madam:		
Dear Sir of ivradam;		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	ng this matter to the following:	
~	- <u></u>	
Mark A. Matusick		
Name of Person		
BP&G Enterprises, LLC		
Firm/Company		
	• .	
1549 Meads Bay LN		
· Address		
	, "	
Jupiter, FL 33458		
City/State and Zip Code	, 	
MMatusick@Comcast.ne E-mail address: (to be used for future annual repor	et	
E-mail address: (to be used for future annual repor	t notification)	
For further information concerning this ma	atter, please call:	
Mark Matusick	at (561) 626-4915	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the follow	ing amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

(TO: Registration Section

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

3	
1. Name of the limited liability company:	BP&G Enterprises, LLC
2. (a) Principal office address of limited liability compar	ny: 1549 Meads Bay LN *
- [√]- (Note: MUST BE STREET ADDRESS)	Jupiter, FL 33458
(b) Mailing address of limited liability company:	1549 Meads Bay EN
(Note: MAY BE POST OFFICE BOX)	Jupiter, FL 33458
	L06000045740 2
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agent:	BUSINESS FILINGS INCORPORATED
Registered Office Address:	1203 GOVERNOR'S SQUARE BLVD SUITE 101 TALLAHASSEE FL 32301-2960 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	W Registered Office address: My1Source, LLC
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1549 Meads Bay LN Jupiter ,FL33458
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider cliability-company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Mark A. Matusick Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pland I am familiar with and accept the obligations of my produced to the produced of the provisions of the provisions of the obligations of the produced of the provisions of the obligations of the produced of the produced of the provisions o	laws of the State of Florida, it is hereby Florida street address of the registered office atical. Or, in the case of a Florida limited by was/were authorized by an affirmative vote-brwise provided in the articles of organization by.
address. I hereby confirm that the limited liability compar	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent