## PZO OOOOO ILIL

(Requestor's Name)				
(Address)				
,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
,				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to 1 ming officer.				
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07/31/20--01005--002 \*\*35.00

FILED
2020 JUL 31 PM 3: 11
SECRETARY OF STAT

JU 09/23/20

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ Name	ECT: BDLN PROPERTIES, INC. of Corporation	
DOC	UMENT NUMBER: P20000001616	
The er	nclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please	ereturn all correspondence concerning this	matter to the following:
BRIA	N NATHANSON	
Name	of Contact Person	<del></del>
BDUN	PROPERTIES, INC.	
Firm/	Company	
1210	IRVING AVE.	
Addre	ess	
I.EHI	GH ACRES, FL 33972	
City/S	State and Zip Code	
	BNATHANSONCPA@AOL.	COM
E-ma	il address: (to be used for future annual	report notification)
For tù	arther information concerning this matter, p	lease call:
BRIA	N NATHANSON	at (714 ) 815-7624
	Name of Contact Person	at (714 ) 815-7624  Area Code & Daytime Telephone Number
Enclo	osed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Amendment Section Division of Corporations	Amendment Section Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	ige is submitted for a corporat	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, 6 tion organized under the laws of the State of <b>FLOR</b> g or registered agent, or both, in the State of Florida.	his NA	-
	ne corporation: BDLN PROPE			_
2. The principal of LEHIGH ACRES	office address: 1210 IRVING A	IVE.		_
3. The mailing ac	Idress (if different):			_
4. Date of incorp	oration/qualification: 01/08/20	Document number: P0000001616		
5. The name and Florida Depart	street address of the current re tment of State: (If resigned, en	egistered agent and registered office on file with the neer resigned)		
	BUSINESS FILING	s,/vc.		
	1200 S. PINE	ISCAND RD.		
	PLANTATION,	FL 33324 5	2020	
6. The name and (if changed):	street address of the new regi	istered agent (if changed) and /or registered office AHARY OF	1020 JUL 31	
	BRIAN NATHANSON	SES SES	PH	'n
	1210 IRVING AVE.	E. F. F.	ယ္	
		P.O. Box NOT acceptable	_	
	LEHIGH ACRES, FL 33972			
		I the street address of the business office of its registe		nt,
Such change was authorized by the	ns authorized by resolution du ne board, or the corporation h	uly adopted by its board of directors or by an officer has been notified in writing of the change.	SO	
Sian 2	attourn	BRIAN NATHANSON, PRSIDENT		_
	re of an officer or director	Printed or typed name and title		
I further agree of my duties, ar document is be	to comply with the provisions	ed agent and agree to act in this capacity, is of all statutes relative to the proper and complete pept the obligation of my position as registered agent hange in the registered office address, I hereby confihis change.	erforma . Or if l rm that l	nce this the
Duan 1	faitaven	JULY 6, 2020		_
Sig	nature of Registered Agent	Date		
If signing on be	ehalf of an entity:			
	Typed or Printed Name			

\* \* \* FILING FEE: \$35.00 \* \* \*