4100 NORTI MIAMI, FL S	H MIAMI AVENUE, 2ND FLOOR 33127			
FEI Number: 47-1633526			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
CRESPO, MAN GREENPOON I 600 BRICKELL MIAMI, FL 331	MARDER AVENUE			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				
The above named	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Florida	а.
	d entity submits this statement for the purpose of changing its regis E: CRESPO MANUEL	stered office or regis		<sup>a.</sup> )5/01/2017
		stered office or regis		
	E: CRESPO MANUEL Electronic Signature of Registered Agent	stered office or regis		05/01/2017
SIGNATURE	E: CRESPO MANUEL Electronic Signature of Registered Agent	stered office or regis		05/01/2017
SIGNATURE	E: CRESPO MANUEL Electronic Signature of Registered Agent		(	05/01/2017
SIGNATURE Officer/Direc Title	E: CRESPO MANUEL Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	VP	05/01/2017 Date

MIAMI, FL 33127 **Current Mailing Address:** 

**Current Principal Place of Business:** 4100 NORTH MIAMI AVENUE, 2ND FLOOR

DOCUMENT# P14000068331

## 

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: BLS OFIZZINA MANAGEMENT CORP

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOPEZ CAMILO

Electronic Signature of Signing Officer/Director Detail

05/01/2017

## FILED May 01, 2017 Secretary of State CC2234337710

MGR

Date