F080000001819

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:

Office Use Only



100251002141

08/29/13--01036--005 **165.00

PAROICH 8
(10/10/13

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of British Virgin Islands in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Beher Holdings, LTD, Inc.
2. The principal office address: 5 Stratford Road, Baltimore, MD 21218
3. The mailing address (if different): 7601 E. Treasure Drive, Suite 1709, North Bay Village, Florida 33141
4. Date of incorporation/qualification: 4/22/2008 Document number: F080000001819
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Zorrilla & Associates, P.L.
Zorrilla & Associates, P.L. 2600 Douglas Rd. Coral Gables, FL 33134
Coral Gables, FL 33134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Juan C. Zorrilla, Esq.
1825 Ponce de Leon Blvd, Suite 517
P.O. Box NOT acceptable Coral Gables, FL 33134
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Charles Edwards Signature of an officer or director Printed or typed name and title
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 offmy divines, haddle am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the observation has been notified in writing of this change. Signature of Registered Agent Signature of Registered Agent
If signing on behalf of an entity:
Juan C. Zorrilla Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)