F17000003129

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(Re	equestor's Name)	
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COVER LETTER

TO:

Amendment Section Division of Corporations

BMR Global Wealth Management Group 1	ne		
SUBJECT: BMR Global Wealth Management Group, I Name of Corporation			
DOCUMENT NUMBER: F17000003129			
The enclosed Statement of Change of Registered Of	fice/Agent and fee are submitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
Rita Medaglio-Barrera			
Name of Contact Person			
BMR Global Wealth Management Group, Inc.			
Firm/Company			
3270 Suntree Blvd., Suite #1103			
Address			
Melbourne, FL 32940			
City/State and Zip Code			
rita@bmrglobalwealth.com			
E-mail address: (to be used for future annual rep	port notification)		
For further information concerning this matter, pleas	se call:		
Rita Medaglio-Barrera	or t 321 \ \244-9100		
Name of Contact Person	at (321) 244-9100 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Dep	artment of State.		
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations 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 cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or regist	nized under the laws of the	e State of <u>Ne</u>	w York	<i>-</i>	
	he corporation: BMR Global Wealth Mar	•				
	office address: 115 Hickory Street, Suite #					
3. The mailing a	ddress (if different): 3251 Anza Street, M	lelbourne, FL 32940				
	poration/qualification: November 12, 200			129		
5. The name and	l street address of the current registered a tment of State: (If resigned, enter resigne	gent and registered office				
	Rita Medaglio-Barrera					
	115 Hickory Street #204					
	Melbourne, FL 32904			NO.	2020	
6. The name and (if changed):	street address of the new registered age	nt (if changed) <u>and</u> /or reg	gistered office	TARY OF	2020 AUG -7 AM	
	3270 Suntree Blvd., Suite #1103			SIA	æ: 	
	Melbourne, FL 32940	X NOI acceptable		tu)	CJ	
The street addre as changed will	ss of its registered office and the street be identical.	address of the business of	office of its r	egistered	agent,	
Such change wa authorized by th	is authorized by resolution duly adopted the board, or the corporation has been no	d by its board of director tified in writing of the cl	s or by an of hange.	ficer so		
for h	edet Bon	Rita Medaglio-Barrera,				
Signatur	e of an officer or director	Printed or type	d name and title			
I further agree to of my duties, an document is bein corporation has	the appointment as registered agent an o comply with the provisions of all stat d I am jamiliar with and accept the obl ng filed merely to reflect a change in th been notified in writing of this change.	utes relative to the prope igation of my position as è revistèred office addre	pacity, or and compl registered a oss, I hereby o	ete perfoi igent. Or confirm ti	rmance ; if this hat the	
HI A	1 HA Bananature of Registered Agent	August 3, 2020				
(Sign	nature of Registered Agent	D,	ate	<u></u>		
If signing on be	half of an entity:					
Rita Medaglio-B	arrera					
T	ped or Printed Name					

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