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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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TALLAHASSEE, FLORID

M. THOMAS

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EXAMINER

Arnstein & Lehr Llp

ATTORNEYS AT LAW SINCE 1893

515 North Flagler Drive · Suite 600 West Palm Beach, Florida 33401 Phone 561.833.9800 · Fax 561.655.5551 www.arnstein.com

Jane A. Lincoln 561.650.8485 jlincoln@arnstein.com

July 14, 2009

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Registered Agent/Registered Office Change - B & H Commercial, LLC

Dear Sir or Madam:

Enclosed please find the following:

1) Cover letter:

2) Statement of Change of Registered Office or Registered Agenta Limited Liability Company; and

 Our check #12150 in the amount of \$25.00 made payable to Floor Department of State for the Filing Fee.

If you have any questions or require anything further, please do not hesitate to call Scott Frank, Esquire, or myself.

lane A. Lincoln

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Pursuant to Internal Revenue Service guidance, be advised that any federal tax advice contained in this written or electronic communication, including any attachments or enclosures, is not intended or written to be used and it cannot be used by any person or entity for the purpose of (i) avoiding any tax penalties that may be imposed by the Internal Revenue Service or any other U.S. Federal taxing authority or agency or (ii) promoting, marketing or recommending to another party any transaction or matter addressed herein.

COVER LETTER

Division of Corporations	
SUBJECT: B & H COMMERCIAL,	
Name of I	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Scott A. Frank, Esq.	
Name of Person	
Arnstein & Lehr LLP	
Firm/Company	700°
515 N. Flagler Drive, Suite 600	LCRE LANGE
Address	ASSE ASSE
West Palm Beach, FL 33401	OF ST
City/State and Zip Code	DATE
SAFrank@arnstein.com E-mail address: (to be used for future annual report	notification)
For further information concerning this mat	ter, please call:
Scott Frank	at (561) 833-9800
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	ing amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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.

1. Name of the limited liability company: B & H COM	MERCIAL, LLC
2. (a) Principal office address of limited liability company:	21 Sabin Street
(Note: MUST BE STREET ADDRESS)	Pawtucket RI 02860
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	21 Sabin Street Pawtucket, RI 02860
	rawtucket, KI 02000
04/06/2005	L05000033903
3. Date of filing/registration in Florida	1. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
Registered Agent:	Hrawg Corp For S
Registered Office Address:	1801 N. Military Track, Seite 200
	Boca Raton, FL 3343
	FIG. E
(b) Enter name of NEW Registered Agent and/or NEW	V Registered Office address 50
NEW Registered Agent:	Scott A. Frank, Esq.
NEW Registered Office Address:	515 N. Flagler Drive, Suite 600
(MUST BE FLORIDA STREET ADDRESS)	West Palm Beach, FL 33401
	,FL
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identi liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization
Signature of a member or authorized representative of a member	•
Scott AvoFrank, Manager	
Printed or typed name of signee	-
I hereby accept the appointment as registered agent and as comply with the provisions of all statules relative to the providing and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this accument is being filed to mer address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, lition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent Scott A. Frank	

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