

# L06000088128

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

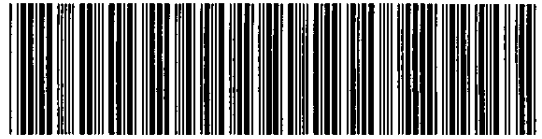
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



## 300138215483

12/01/08--01019--014 \*\*25.00

RECEIVED  
TALLAHASSEE, FLORIDA

2009 JAN -7 PM 2:46

FILED

C. LEWIS

1-8-09

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BANX LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alejandro F. Caruso  
(Name of Person)

Banx LLC  
(Firm/Company)

4111 Sapphire Bend  
(Address)

Weston, Florida 33331  
(City/State and Zip Code)

For further information concerning this matter, please call:

Alejandro Caruso at ( 954 ) 245-2827  
(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 amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 2, 2008

ALEJANDRO F. CARUSO  
BANX LLC  
4111 SAPPHIRE BEND  
WESTON, FL 33331

SUBJECT: BANX LLC  
Ref. Number: L06000088128

We have received your document for BANX LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II

Letter Number: 608A00058917

**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: BANX LLC

2. (a) Principal office address of limited liability company: 4111 Sapphire Bend, Weston, Florida 33331  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: 4111 Sapphire Bend, Weston, Florida 33331  
**(Note: MAY BE POST OFFICE BOX)**

9/8/2006

3. Date of filing/registration in Florida

L06000088128

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Andrea L. Minlos

Registered Office Address: 4344 Pine Ridge Court  
Weston  
Florida, 33331

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** Alejandro F. Caruso

**NEW Registered Office Address:** 4111 Sapphire Bend,  
**(MUST BE FLORIDA STREET ADDRESS)** Weston  
,FL 33331

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Andrea Minlos

(Printed or typed name of signee)

*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 of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

(Signature of Registered Agent)

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

**FILING FEE: \$25.00**

FILED  
2009 JAN -7 PM 2:47  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE