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| (Requestor's Name) | | | | | | | |
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| PICK-UP WAIT MAIL | | | | | | | |
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| (Business Entity Name) | | | | | | | |
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| Certified Copies Certificates of Status | | | | | | | |
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| Special Instructions to Filing Officer. | | | | | | | |
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Office Use Only



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COVER LETTER

| | gistration Section vision of Corporations | | | | | | |
|-------------------|---|------------------------------------|-----------|--|------|--|--|
| SUBJECT | Bianca Management, LLC | | | | | | |
| | Name of Limited Liability Company | | | | | | |
| Dear Sir or | Madam: | | | | | | |
| The enclose | ed Registered Agent/Registered Of | fice Chan | ge and fo | ee(s) are submitted for filing. | | | |
| Please retur | rn all correspondence concerning the | his matter | to the fo | llowing: | | | |
| Mari Adam | | | | | | | |
| | Name of Person | | | _ | | | |
| | | | | | \ | | |
| _ | Firm/Company | | | - | 1717 | | |
| 2856 Banya | n Boulevard Circle NW | | | | - | | |
| | Address | - | | _ | | | |
| Boca Raton, | Florida 33431 | | | | | | |
| | City/State and Zip Code | | | _ | | | |
| maπi.adam(| @comeast.net | | | | | | |
| E-mai | l address: (to be used for future an | nual repor | t notific | ation) | | | |
| For further | information concerning this matter | r. please ca | all: | | | | |
| Mari Adam | | 56 at (| 51 | 302-5886 | | | |
| | Name of Person | | | Area Code & Daytime Telephone Number | | | |
| Reg Div P.C | gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314 | | | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | |
| Enc | closed is a check for the following | g amount | : | | | | |
| ■ \$25 Filing Fee | | ☐ \$55 Filing Fee & Certified Copy | | | | | |

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

| i. | Na | me of the limited liability company: Bianca Manageme | nt, LLC | 2 | |
|--------------|---|--|-------------------------------------|---|--|
| 2. | (a) | 2856 Banyan Boulevard Circle NW | I | (b) 2856 Banya | an Boulevard Circle NW |
| | (4) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | <u></u> | | failing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | | Boca Raton, FL 33431 | _ | Boca Raton | , FL 33431 |
| | | 10/17/2006 | _ | L0600010090 | 09 |
| 3. | | Date of filing/registration in Florida | 4. | I | Document number |
| 5. (a) | (a) | Morris Law Group | | | 1021 SE |
| | (, | Registered Agent and Registered Office shown on the records of the 7284 W Palmetto Park Road | AUG 21 CRETA | | |
| | | Registered Office Address (MUST BE FLORIDA STREET A Suite 101 | DDRES | <u>22)</u> | P. I |
| | | Boca Raton . FL | 33433 | | 2: 19 |
| (b) | | Mari Adam Enter name of NEW Registered Agent and/or NEW Registered of 2856 Banyan Boulevard Circle NW NEW Registered Office Address: | | | |
| | | Boca Raton, FL_ | 33431 | | |
| ch ag wa the | ange ent v is/we e arti Signat herelovisi e obli- mere | imited liability company is not organized under the law or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cless of organization or the operating agreement of the law of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete prigations of my position as registered agent as provided by reflect a change in the registered office address, I have the control of this shappy the control of the control of this shappy the control of the control | registe bility of the lin imited Ma | red office and ompany, it is mited liability liability compari Adam | the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. Printed or typed name of signee |
| _ | | re of Registered Agent | | | |