## 107000079837

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SECRETARY OF STATE

K. SALY JAN 26 2017

## **COVER LETTER**

TO:

Registration Section

Division of Corporations					
Business Valuation Analysts, LL SUBJECT:	_C				
	Name of Limited Liability Company				
Dear Sir or Madam:		<del>ب</del>			
The enclosed Registered Agent/Registered Office C	hange and fee	e(s) are submitted for filing.			
Please return all correspondence concerning this ma	atter to the fol	lowing:			
Timothy Kelly Bronza					
Name of Person					
Business Valuation Analysts, LLC					
Firm/Company					
3655 Maguire Boulevard, Suite 175					
Address					
Orlando, FL 32803-3074					
City/State and Zip Code					
tbronza@bvanalysts.com					
E-mail address: (to be used for future annual r	eport notifica	tion)			
For further information concerning this matter, plea	ise call:				
Timothy Kelly Bronza	407 t (	599-2825			
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	<b>□</b> \$55	Filing Fee & Certified Copy			
INH\$18 (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.

1. N	ame of the limited liability company: Business Valu	uation .	Analysts,	LLC
2. (a)	Business Valuation Analysts, LLC	(b) Business Valuation Analysts, LLC		
-: ( <del></del> )	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	3655 Maguire Boulevard, Suite 175		3655 Ma	aguire Boulevard, Suite 175
	Orlando, FL 32803-3074	_	Orlando	, FL 32803-3074
	September 5, 2007		L070000	79837
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Corporation Service Company			
5. (u)	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of Stat	- e:
	Corporation Service Company			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES.	<u>2)</u>	. 2
	Tallahassee, FL	32301		2011 JAN 24 PH & 23 2011 JAN 24 PH & 23 FALLAHASSEE, FI ORIGITATION
(b)	Timothy Kelly Bronza			NSS P
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:	THE R D
	Timothy Kelly Bronza			FI ORI
	NEW Registered Office Address:			- William William
	3655 Maguire Boulevard, Suite 175		<u> </u>	_
	Orlando, FL	32803	-3074	_
the chagent was/w the art Signal I here provise the obto men	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of ideas of organization or the operating agreement of the attree of a member or authorized representative of a member why accept the appointment as registered agent and agricular ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided the proper and complete ligations of my position as registered agent as provided the proper and complete ligations of my position as registered office address, I have the proper and complete ligations of this change in the registered office address, I have the proper and complete ligations of this change.	the reginability c f the limited  Tir	stered office ompany, it in ited liability connothy Kell	e and the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in mpany.  y Bronza  Printed or typed name of signee  pacity. I further agree to comply with the

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

Signature of Registered Agent