

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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G. MCLEOD

JUN 28 2012

EXAMINER



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06/25/12--01038--015 **25.00

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COVER LETTER

Division of Corporations					
SUBJECT:	BNB VENT	URE	S PAI	_M BE	ACH I, LLC
	Name of I	_imited	l Liabil	ity Com	pany
Dear Sir or Madam:					
The enclosed Registered A	gent/Registered C	Office (Change	and fee	(s) are submitted for filing.
Please return all correspond	dence concerning	this m	atter to	the follo	owing:
•					
JODY	CROWLEY				
	of Person			_	
CORPORATE SE	RVICE BUREA	U INC	•		
Firm/	Company			_	
283 WASHII	NGTON AVENU	E			
Add	tress				
	Y/NY 12206				
City/State	and Zip Code				
jvc@corpo E-mail address: (to be used fo	ratebureau.com				
E-mail address; (to be used to	r future annual report n	otificatio	n)		
For further information cor	cerning this matte	er, plea	se call	:	
JODY CROW	/LEY	at (518	`	463-8550
Name of Person		_ #1 (Area Code	& Daytime Telephone Number
STREET/COURIER) ADDRESS.		MA	HING /	ADDRESS:
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
Clifton Building		P.O. Box 6327			
2661 Executive Center Circle			Tallahassee, Florida 32314		
Tallahassee, Florida 3	32301				
Enclosed is a check for the following amount:					
\$25 Filing Fee		\$55 Filing Fee & Certified Copy			

TO: Registration Section

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.

-	
Name of the limited liability company: BNB V	ENTURES PALM BEACH I, LLC
2. (a) Principal office address of limited liability compar	ny: 34 PANTIGO ROAD
(Note: MUST BE STREET ADDRESS)	C/O LEONARD ACKERMAN EAST HAMPTON NY 11937
(b) Mailing address of limited liability company:	34 PANTIGO ROAD
(Note: MAY BE POST OFFICE BOX)	C/O LEONARD ACKERMAN EAST HAMPTON NY 11937
10/18/2007	L07000105939
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agent:	CORPORATE SERVICE BUREAU INC.
Registered Office Address:	515 EAST PARK AVENUE TALLAHASSEE FL 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	CW Registered Office address: CORPORATE SERVICE BUREAU INC.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1540 GLENWAY DRIVE TALLAHASSEE ,FL32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identiability company, it is hereby confirmed that the change is of the members of the limited liability company or as other the operating agreement of the limited liability companions of the limited liability compan	Florida street address of the registered office ntical. Or, in the case of a Florida limited so was/were authorized by an affirmative vote erwise provided in the articles of organization
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pland I am familiar with and accept the obligations of my pland I am familiar with and accept the obligations of my pland I am familiar with and accept the obligations of my pland I am familiar with and accept the obligations of my pland I am familiar with a manager than the second in th	agree to act in this capacity. Is wither agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.

Signature of Registered Agent