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COVER LETTER

TO:	Registration Section Division of Corporation				
SUBJI	Bellona Consul	ants LLC			
30130		Name of Limited Liability Company			
Dear S	ir or Madam:				
The en	 iclosed Registered Agent 	Registered Office Change and fee(s) are submitted for filing.			
Please	return all correspondence	concerning this matter to the following:			
Danie	elle R. Gilkey				
	Name o	Person			
Bello	na Consultants LLC				
	Firm/C	mpany			
3113	Florida Blvd.				
	Addr	SS			
Delra	y Beach, FL 33483				
	City/State	nd Zip Code			
dgilke	ey954@gmail.com				
i	E-mail address: (to be use	for future annual report notification)			
For fu	rther information concern	ng this matter, please call:			
Danie	elle Gilkey	954 240-2233			
	Name of Person	Area Code & Daytime Telephone No	umber		
	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center	Registration Section Division of Corporations P.O. Box 6327			
	Tallahassee, Florida 32	01 the following amount:			
		•			
	■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy			
INHSI	8 (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: Bellona Cons	sultants L	LC
2. (a)	,	(b)	
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	8/26/2010 Date of filing/registration in Florida	<u>L</u>	10000090019 Document number
	Danielle R. Gilkey	₹.	Document Hamber
5. (a	Registered Agent and Registered Office shown on the records of 6698 Buena Vista Drive Registered Office Address [MUST BE FLORIDA STREET]		
	Margate	33063	
(b)	Enter name of NEW Registered Agent and/or NEW Registered 3113 Florida Boulevard NEW Registered Office Address:	d Office addr	PEC TAMO: 37
	Delray Beach , FI	33483	
the chagent was/w the Ar Sign I herrorist the one notific	limited liability company is not organized under the la lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the ature of a member or authorized representative of a member eby accept the appointment as registered agent and agistions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I led in writing of this change.	f the registeriability consofthe limited limit	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in bility company. Elle R. Gilkey Printed or typed name of signee In this capacity. I further agree to comply with the

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