L11000098212

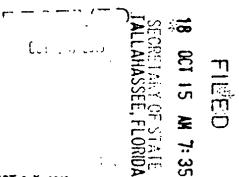
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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S. YOUNG

COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Div	ision of Corporations					
SUBJECT:	BOCANUTS GROUP LLC					
SOBSECT.	Name of Limited Liability Company					
Dear Sir or l	Madam:					
The enclose	d Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.			
Please return	n all correspondence concerning th	is matter to	the following:			
Allen Ham	naoui					
	Name of Person					
BOCANU [*]	TS GROUP LLC					
	Firm/Company					
4400 N. F	ederal Highway, Suite 210			ب ے، مرا ب		
	Address			ALLA ECRE		
Boca Rato	on, FL 33431			AHASSE		
	City/State and Zip Code			<u>ini⊕</u>		
lontra73@	gmail.com			ESTATE FLORIDA		
E-mail	address: (to be used for future ann	ual report no	otification)	A GE		
For further in	nformation concerning this matter,	please call:		•		
Allen Ham	aoui	914 at (659-0847			
	Name of Person		Area Code & Daytime Telepho	one Number		
Regi Divi. Clift 2661 Talla	stration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Encl	losed is a check for the following	amount:				
€ \$2	25 Filing Fee		\$55 Filing Fee & Certified Copy			

✓ 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.

Name of the limited liability company: BOCANUTS GROUP LLC							
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)			
	4400 N. Federal Highway, Suite 210		4400 N	Federal Highway, Suite 210			
	Boca Raton, FL 33431		Boca R	aton, FL 33431			
	02/11/2014		L110000	98212			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)							
` '	Registered Agent and Registered Office shown on the records of ALLEN HAMAOUI	of the Florid	la Dept. of Sta	te:			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
	499 E. PALMETTO ROAD SUITE 212						
	BOCA RATON	_L 33432	2	AFASS			
				ILEMEND ARY OF STATE ASSEE, FLORIDA			
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office a	ddress:	- FEST			
Enter name of NEW Registered Agent and/or NEW Registered Office address:							
	ALLEN HAMAOUI			> 5			
	NEW Registered Office Address:	,		_			
	4400 N. Federal Highway, Suite 210			_			
David							
	Boca Raton	L 33431		_			
the ch agent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited tere authorized by an affirmative vote of the members icles of organization or the operating agreement of the distribution of the members of th	of the reg liability of s of the li ne limited	istered offic company, it mited liabili	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany.			
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee			
provis the ob to men notifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and completing tions of my position as registered agent as provided reflect a change in the registered office address. If the writing of this change.	gree to ac te perfort led for in I hereby (ct in this cap nance of my Chapter 60 confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been			
Signati	are of Registered Agent	. n	. 	P1 33314			
1	Division of Corporations • P.O	. BOX 654	z / ● TaHaha	ISSEE, F.L. 32314			

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