## 11100140918

(F	Requestor's Name)	
(A	Address)	
(A	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
([	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	

G. MCLEOD

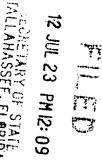
JUL 25 2012

**EXAMINER** 



500237552055

07/23/12--01024--018 \*\*25.00



## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Balassiano H Name of Limit	ed Liability Company		
Dear Sir or Madam:	ı		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Raymond Balassiano Name of Person	<del></del>		
Balassiano Holdings,	, 220		
4808 N.W. 16th Ter  Address  Boca Raton, FL. 33	race		
City/State and Zip Code  Balassiano 24 6 91  E-mail address: (to be used for future annual report notifica			
For further information concerning this matter, please call:			
Raymond Balassiano at (561) 706-1809  Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee, Florida 32301	Tananassee, Fiorida 32314		
Enclosed is a check for the following amount:			
\$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 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.

1. Name of the limited liability company: Balas:	siano Holdings, LLC
2. (a) Principal office address of limited liability company	, .
(Note: MUST BE STREET ADDRESS)	Boca Raton, FL. 33431
(b) Mailing address of limited liability company:	SAME AS 5
(Note: MAY BE POST OFFICE BOX)	
12/15/11 3. Date of filing/registration in Florida	L11000140918
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Brandon M. Balassiano
Registered Office Address:	Boca Raton, FL 33487
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : (Same) <u>NEW Registered Office Address:</u>	W Registered Office address & Tomo
(MUST BE FLORIDA STREET ADDRESS)	48.08 N.W. 16th Terrace Boca Raton ,FL 33431
If the limited liability company is not organized under the confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office
Brandon Balassiano Printed or typed name of signee	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the providing I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office what has been notified in writing of this change.
Signature of Registered Agent	

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