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(R	Requestor's Name)						
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	WAIT MAIL						
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates of Status						
Special Instructions to Filing Officer:							





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JAN 26 2016 J SHIVERS

COVER LETTER

Division of Corporations	
SUBJECT: Bradenton Can Care Name of Limited	J.L.C I Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change a	and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	he following:
Edward J Zbiegien Name of Person Road auch - Conse Care	
Firm/Company	
1505 Tamiami Trail Address	
Bradentsn FL 34205 City/State and Zip Code	
E-mail address: (to be used for future annual eport no	otification)
For further information concerning this matter, please call:	
Name of Person at (94)	Area Code & Daytime Telephone Number
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section D'vision of Corporations P.O. Box 6327 Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

Enclosed is a check for the following amount:

Registration Section

TO:

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

ru	mac	l			_	_	
1.	Na	ime of the limited liability company: <u>Bradent</u>	W	i Car (<u>ena'</u>	LLC	
2.	(a) -	3240 E 59th Drive	<u> </u>	3340	E 59	th Drive	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			-	f limited liability company: E POST OFFICE BOX)	
	3240 E 59th Drive 324			3240	E S	9th Drive	·····
	,	Bradenton, FL 3420B	<u>.</u>	Brade	nton,	FL 3420	
		April 6th, 2012		<u>~120</u>		47600	
3.		Date of filing/registration in Florida	4.	De	ocument nu	mber	
5.	(a)	Jonathan D. Wasaski	<u> </u>				
		Registered Agent and Registered Office shown on the records of the	e Floridi	a Dept. of State:			
		3040 E. S9th Drive Registered Office Address (MUST BE FLORIDA STREET AR	DRESS				
		IMEST DE LEVRIDE MILES	<i>/BR(2.</i>).	<u>u</u>			
		Bradenton .fl.	346	208		16 SEC	
	<i>(</i> 1 ×	Edward beach Zbies	ไม⊖เ	\cap		AART AART	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered C	-) `			25 25 25 25	
		1505 Tamiami Trac				STA STA	
		NEW Registered Office Address:				IDA IDA	
		Bradenton .FL	342	205			
the age wa	echa ent v s/we	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabers authorized by an affirmative vote of the members of	he regi sility co the lin	stered office arompany, it is horited liability of	nd the busin creby confir company or a	ness office of the regist rmed that the change(s	ered
the	arti	cles of organization or the operating agreement of the li	mited .	Lips / A Tid!	iny. AN L	NYSASKI	
	igya1	ture of a member or authorized representative of a member		JONA PE	rinted or typed	I name of signee	
11	s ierel	by accept the appointment as registered agent and agre-	e to ac	t in this capaci	ity. I further	r agree to comply with	the
pro the to	visi v obl merc	ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided By raflect a change in the registered office address, I ha	erjorm for in G ereby c	unce of my and Chapter 605, F onfirm that the	res, and 1 al r.S. Or, if the limited lial	ni juminar wun ana ac his document is being f bility company has bee	cepi iled en

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