## 213000/65321

(Ře	equestor's Name)			
(Address)				
(Address)				
(C	ity/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL.		
(Business Entity Name)				
(D	ocument Number)			
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				

Office Use Only



700318453277

09/20/18--01021--033 \*\*25.00

8 SEP 20 PM 1: 07

5EP 12 2018

## **COVER LETTER**

	Registration Section Division of Corporations					
SUBJEC	BellaGirl Media, LLC					
	•	Name of Limited Liability Company				
Dear Sir	or Madam;					
The encl	osed Registered Agent/Registered Off	ice Change and	I fee(s) are submitted for filing.			
Please re	turn all correspondence concerning th	is matter to the	following:			
Jamie I	Forrest					
	Name of Person					
BellaGi	irl Media, LLC					
	Firm/Company		<del></del>			
7050 W	V. Palmetto Pk. Rd., Suite #138					
	Address		<del></del>			
Boca R	taton, FL 33433					
	City/State and Zip Code		_			
jamie@	bellagirlmedia.com					
E-n	nail address: (to be used for future ann	ual report noti	lication)			
For furth	er information concerning this matter.	please call:				
Jamie F		917 at (	523-7440			
	Name of Person		Area Code & Daytime Telephone Number			
R D C 2	Registration Section Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, Florida 32301	Re Di P.e	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:						
Œ	3 S25 Filing Fee	□ s.	55 Filing Fee & Certified Copy			
INHSTR (2	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.

l. Na	me of the limited liability company:	dia, LL0		
2. (a)	7050 W. Palmetto Pk. Rd.		<sub>b)</sub> 7050 W.	. Palmetto Pk. Rd.
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`		dailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	Suite 138	<del></del>	Suite 13	8
	Boca Raton, FL 33433		Boca Ra	iton, FL 33433
	09/17/2018		L1300016	55321
<b>3</b> .	Date of filing/registration in Florida	— 4.		Document number
i. (a)	BMEN Trading, LLC			
, (a)	Registered Agent and Registered Office shown on the records of 7050 W. Palmetto Pk. Rd.	the Florid	la Dept. of State	:
	Registered Office Address (MUST BE FLORIDA STREET) Suite 138	ADDRES	<u>S)</u>	
	Boca Raton ,FI	33433	}	
(b)	Jamie Forrest			7 <b>6</b>
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	idress:	SER SER
	7050 W. Palmetto Pk. Rd.			SEP 20 PH 1: 07
	NEW Registered Office Address:			
	Suite 138			# 07
	Boca Raton .FI	33433	}	
he cha gent w /as/we ne arti-	mited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members cles of organization or the operating agreement of the language of a member of authorized representative of a member	f the reg iability e of the lir : limited	istered office ompany, it is nited liability liability com	and the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in
Signat	ure of a member of authorized representative of a member			Printed or typed name of signee
rovisio he obli o merc	ov accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I I in writing of this change.	ree to ac perforn d for in hereby c	t in this cape tance of my c Chapter 605 confirm that i	icity. I further agree to comply with the luties, and I am familiar with and accep , F.S. Or, if this document is being filed he limited liability company has been
Signatur	egot Registered Agent			

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

INHS/18 (2/14)