## 1140000 68957

(Panyagtara Nama)
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

DC 5/11

## **COVER LETTER**

Bergen 42 PLLC
Name of Limited Liability Company

Registration Section
Division of Corporations

TO:

Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	inge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Bjorn Johannesse  Name of Person  Bergen 42 7 L L C  Firm/Company  1863 Lake Spier Dr  Address  Winter Park FL 3278  City/State and Zip Code  bergen 2000 Dearthline  E-mail address: (to be used for future annual rep	9
For further information concerning this matter, please	call:
Bjorn Johannessen at ( Name of Person	407 739 1863 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amou	nt:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (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 Nome of the	limited liability commany. Be	tgen42'	7LLC		
2. (a) [863]	limited liability company:	(b)	1863	Lake Spailing address of limited	·
Wint	(Note: MUST BE STREET ADDRESS UT Park, FL 327			(Note: MAY BE POST) - Park, Fl	<u>обясь вох)</u> - 32 789
A	pril 28, 2014 Bate of filing/registration in Florida			DOOD 68	957
3. 5. (a) Unik Registered	d States Corporation Agent and Registered Office shown on the	n Ageut, 1	wc		
Registered	02 Winding Oaks Office Address Must be Florida  K A				SECRETA TALLAHA 15 HAY-
	ank Brown	, FL <u>33</u>	612		TILED NRY OF ST SSEELFLO
(*)	of NEW Registered Agent and/or NEW  9 Lake Spier Dr		ress:		ATE RIDA 20
<u> </u>	uter Park				
		, FL31	789		
the change or ch agent will be ide was/were author the articles of or	bility company is not organized und anges are made, the Florida street a entical. Or, in the case of a Florida sized by an affirmative vote of the magazization of the operating agreement	ddress of the regist limited liability con nembers of the limi ent of the limited li	ered office npany, it is ted liability ability com	and the business off hereby confirmed the company or as other	ice of the registere lat the change(s) rwise provided in
Signature of a m	note or authorized representative of a mem	ber	V	Printed or typed name of	signee
I hereby accept provisions of di the obligations to merely reflect notified by writing	the appointment as registered agen statutes relative to the proper and of my position as registered agent a a change in the registered office an of this change.	t and agree to act : complete performa s provided for in C ddress, I hereby co	in this capa nce of my d hapter 605, nfirm that t	city. I further agree luties, and I am fami F.S. Or, if this doci he limited liability co	to comply with the liar with and accep ument is being file ompany has been
Signature of Regist	ered Agent				