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JUL 1 3 2015

J SHIVERS

## **COVER LETTER**

	of Corporations	·
SUBJECT:	BENNY-WILL	GLOBAC, CLC Limited Liability Company
	Name of I	Limited Liability Company
Dear Sir or Mada	m:	
The enclosed Reg	zistered Agent/Registered Office Cl	hange and fee(s) are submitted for filing.
Please return all o	correspondence concerning this mat	tter to the following:
	CHRIS LUTZ Name of Person	·
BENNY -	WILL GLOBAL, Firm/Company	LLC
378 W	OSCEDLA ST Address	
CLER	MONT FL 347 City/State and Zip Code	7!!
E-mail addre	ULUTZ @ GM PT ess: (to be used for future annual re	port notification)
For further inform	nation concerning this matter, pleas	e call:
	2/3 LUTE at	(248) 842-3003
N	ame of Person	Area Code & Daytime Telephone Number
	COURIER ADDRESS:	MAILING ADDRESS:
_	on Section of Corporations	Registration Section Division of Corporations
Clifton B	•	P.O. Box 6327
2661 Exe	cutive Center Circle ee, Florida 32301	Tallahassee, Florida 32314
Enclosed	is a check for the following amou	unt:
□ \$25 Fi	ling Fee	\$55 Filing Fee & Certified Copy

INHS18 (2/14)

7/2/15

## 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.	Na	me of the limited liability company:	1-W	116	GLOB	SAZ, L	LC
2. (	a) .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (b) _	M		ss of limited liab	
		1/29 GREENLEY AVE		1/2	-9 G	REENZ	EY AVE
		1/29 GREENLEY AVE GROVELAND, FL 34736		6pc	DUELA	wo, F	EY AVE - 3473
<ol> <li>3.</li> <li>5.</li> </ol>	(a)	Date of filing/registration in Florida	4.		Document	number	
J. (	(4)	Registered Agent and Registered Office shown on the records of the	e Florida De	pt. of State:			
		CHRISTOPHER LU	72				
		Registered Office Address (MUST BE FLORIDA STREET AL	ODRESS)				
		1129 GREENLEY AV	E				
		GROVELAND ,FL	347	136		A SE	·
(	L)					CA A	5 <u>J</u>
,	<b>.</b>	Enter name of NEW Registered Agent and or NEW Registered O	office addre	<u>ss</u> :		TARY OF	
		NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·		2018 11 S	
		378 W OSCEDLA S	ST			AUE 310A	л Э
		CLERMONT ,FL	34-	711			
the cager	chai it w we artic	mited liability company is not organized under the laws age or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab re of a member or authorized representative of a member	he register pility comp the limite	red office pany, it is d liability pility comp	and the but hereby co company pany.	usiness office infirmed that	of the registered the change(s) se provided in
I he prov	reb visio obli vere	y accept the appointment as registered agent and agree on sof all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address. I he in writing of this change.	e to act in erformanc for in Cha ereby conf	this capa	city. I fur uties, and F.S. Or, he limited	ther agree to	comply with the
Sign	atur	e of Registered Agent		1/2	113		