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PICK-UP	☐ WAIT	MAIL			
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Certified Copies Certificates of Status					
Special Instructions to I	Filing Officer:				
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Office Use Only



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COVER LETTER

то:	Registration Section Division of Corporations	·
SUBJ	MITRA SCIENCE LLC ECT:	
		of Limited Liability Company
Dear S	Sir or Madam:	
The er	nclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.
Please	return all correspondence concerning this	matter to the following:
Andre	w Pierce	
	Name of Person	
Cindy'	's Florida LLC	
	Firm/Company	
8051 1	N. Tamiami Trail STE E6	
	Address	
Saraso	ota, Florida. 34243	
	City/State and Zip Code	
reports	s@wyomingllcattorney.com	
Ī	E-mail address: (to be used for future annua	al report notification)
For fu	rther information concerning this matter, p	lease call:
Andre	w Pierce	727 300-0042 at ()
	Name of Person	Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following a	mount:
	■ \$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 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.

a)	8051 N. Tamiami Trail STE E6		(b)	8051 N. Ta	amiami Trail STE E6
,	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)		,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Sarasota, Florida, 34243			Sarasota, F	lorida, 34243
	09/02/2015		;	L15000150	765
	Date of filing/registration in Florida	4.	_		Document number
(0.)	BEACON INVESTMENTS, LLC				
(a)	Registered Agent and Registered Office shown on the reco	ords of the Flori	da i	Dept. of State	- !!
	13801 WALSINGHAM RD			·-··	
	Registered Office Address (MUST BE FLORIDA STE	<u>REET ADDRE:</u>	<u>SS)</u>		
	A117				702 7.02
	LARGO	_, FL_33774			300
					المستقال الم
b)					نَا أَنَّ اللَّهُ عَلَيْهِ عَ
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regi</u>	istered Office a	dd	ress:	
	Cindy's Florida LLC			F PH 12: 12	
	NEW Registered Office Address:				
	8051 N. Tamiami Trail STE E6				
	Sarasota	. FL ³⁴²⁴³			
ige it w /we artic	imited liability company is not organized under to or changes are made, the Florida street address will be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the members of organization or the operating agreement of	of the registe ted liability of bers of the li of the limited	rec con mit lia	l office and apany, it is led liability ability com	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided i pany.
n	drew Pierce ture of a member or authorized representative of a member	_ Ar	ıdre	ew Pierce, N	-
ınat	ture of a member or authorized representative of a member				Printed or typed name of signee

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

Andrew Pierce
Signature of Registered Agent