

L160000 19768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

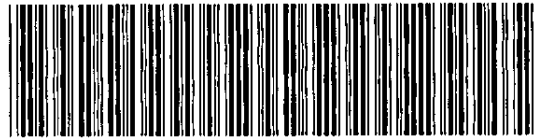
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STOCK EXCHANGE
TRADING SYSTEM

FEB 08 2016

S. YOUNG

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 986592 8081532

AUTHORIZATION :

COST LIMIT : \$ 35.00



ORDER DATE : February 3, 2016

ORDER TIME : 2:36 PM

ORDER NO. : 986592-005

CUSTOMER NO: 8081532

CHANGE OF AGENT

NAME: BRACY MANAGEMENT LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

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16 FEB -3 AM 10:27
STATE
TALLAHASSEE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2016

CORPORATION SERVICE COMPANY - MELISSA

SUBJECT: BRACY MANAGEMENT LLC
Ref. Number: L16000019768

RESUBMIT
Please give original
submission date as file date.

We have received your document for BRACY MANAGEMENT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 416A00002425

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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NOT RECORDED
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bracy Management LLC.
Name of Corporation

DOCUMENT NUMBER: L160000019768

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mario Bracy
Name of Contact Person

Bracy Management LLC.
Firm/Company

9786 Isles Cay Drive
Address

Delray Bch, FL 33446
City/State and Zip Code

MARIOBRACY@gmail.com
E-mail address: (to be used for future annual report notification)

FILED
16 FEB -3 AM 10:27
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

Mario Bracy at (561) 523-3137
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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. Name of the limited liability company: Bracy Management LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

9786 Isles Cay Drive
Delray Bch, FL 33446

2/2/16
3. Date of filing/registration in Florida

L16000019768
4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Corporation Service Company
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1201 Hays Street
Tallahassee, FL 32301

(b) Mario Bracy
Enter name of NEW Registered Agent and/or NEW Registered Office address:

9786 Isles Cay Drive
NEW Registered Office Address:

Delray Bch, FL 33446

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of incorporation or the operating agreement of the limited liability company.

Mario Bracy
Signature of a member or authorized representative of a member

Mario Bracy
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified of this change.

Mario Bracy
Signature of Registered Agent

BY:

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

FILED
16 FEB -3 AM 10:28
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS