8/2/2019 Division of Corperat **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000231226 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 120090000081 Phone: : (307)200-2803 Fax Number : (855)330-1010

> **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:___

LLC REGISTERED AGENT CHANGE **BONITA BELTING, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

AIIG 05 2019

M. SOLOMON

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. N	ame of the limited liability company: Bonita Be	elting	J LLC				
2. (a)	28444 DEL LAGO WAY	(b) 28444 DEL LAGO WAY					
- (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			-		
	BONITA SPRINGS, FL 34135	_	BONITA	\ SPRINGS, FL 3	34135		
	07/11/2016		L16000	130190			
3.	Date of filing/registration in Florida	4.		Document number	* * * * * * * * * * * * * * * * * * * *		
5. (a)	UNITED STATES CORPORATION AGENTS	S. INC.					
(u)	Registered Agent and Registered Office shown on the records of the	he Florida	t Dept. of Stat	- e:			
	13302 WINDING OAK COURT						
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	 02	_			
	Λ				:1:.	20	
	TAMPA	33612	2	•		2019 AUG	
(b)	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address: 7901 4th St N		-		-2 AK 9:50	1	
	NEW Registered Office Address:			_	,	\bigcirc	
	STE 300			_			
	St. Petersburg, FL	33702	<u>></u>	_			
the cha agent v was/wa	imited liability company is not organized under the law, unge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liabers.	he regis bility co the lim imited l	stered office ompany, it is lited liability liability con	e and the business of s hereby confirmed v company or as oth	ffice of t that the i	he regi change	istered (s)
Signa	ture of a member or authorized representative of a member	KIIE	y Park	Printed or typed name	of simon		
I here provisi the oblinoity of the province o	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I ha I in spriting of this change. Bill Havre - Assistant to of Registered Agent	erforme for in C ereby ce	ance of my Thapter 605 Infirm that	acin Hurthar asre	a to con	iply wi in and i is being y has b	th the accept g filed een