## 116000152481

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300311659513

04/16/18--01021--022 \*\*25.00

ZOUB APR 16 PM 12: 0

FILED

## **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJECT: 2016 NW 7TH LLC  Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Ethan Bangsil Name of Person							
B&B Venture Capital LIC Firm/Company							
P.O. Box 970088  Address							
Coconut Creek, FL 33097 City/State and Zip Code							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Ethan Bang SII at (856) 217-7651  Name of Person 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 amount:							
\$25 Filing Fee \$\square\$ \$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.

i. Na	me of the limited liability company:2	016 1	JW 774 L	-LC	
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	-	address of limited liability:  MAY BE POST OFFICE	company:
	Gainesville, FL 3260	3		onut Creek	
			33	097	
	8/15/2016		1_160	00152481	
3.	Date of filing/registration in Florida	4.	Docu	ment number	
5. (a)	Garofalo Law Office P. A Registered Agent and Registered Office shown on the records of		Dept. of State:		
	433 Plaza Real				
	Registered Office Address (MUST BE FLORIDA STREET.	<u>ADDRESS)</u>		$\mathbf{F}_{cc}:\mathbf{R}_{c}$	
	Suite 275				
	Boca Raton , FI		432	HASE APR	<u> </u>
. (b)	B&B Venture Capital	uc	-   Ether	() () () () () () () () () () () () () (	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	ress:	M 12: FLORI	$\Box$
•	433 Plaza Real			107 O	
	NEW Registered Office Address:				
	Suite 275				
	Boca Raton , FI	33	3432		
the cha agent w was/we	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited library authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the regist ability control of the limi	tered office and t mpany, it is here ited liability com	the business office of the by confirmed that the copany or as otherwise pany or as otherwise	he registered change(s)
	Can De LANGE			Bangs II	
Signat	rure of a member or authorized representative of a member		Printe	d or typed name of signee	
provisi the obli to mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I	ree to act performa d for in C hereby co	in this capacity. Ince of my duties, 'hapter 605, F.S. nfirm that the lin	I further agree to con , and I am familiar wit Or, if this document i nited liability company	ply with the h and accept s being filed has been

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