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Registration Section TO: **Division of Corporations** B+G Educational Innovations, LC Name of Limited Liability Company SUBJECT: 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: Don Platt Name of Person B+G Educational Innovations, LLC Firm/Company 2280 Pineapple Street Melbourne FL 32935 City/State and Zin Code <u>byeiconsultants @ gmail.com</u> E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (32) 243 4633 Area Code & Daytime Telephone Number Don Plat MAILING ADDRESS: STREET/COURIER ADDRESS: **Registration Section Registration Section Division of Corporations** Division of Corporations P.O. Box 6327 **Clifton Building** Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: 🖄 \$55 Filing Fee & Certified Copy \$25 Filing Fee 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.

Name of the limited liability company: B+G Educational Innovations 1. Tapestry Park Circle (b) 7643 Gate Par Mailing address of limited liability company: Principal office address of limited liability company: (Note: MAY BE POST OFFICE BOX) (Note: MUST BE STREET ADDRESS) 世 104-11 cksonville, F-L 37246 32256 time July 1, 2015 <u>August 30, 2016 - Effective Ju</u> Date of filing/registration in Florida L1600 Document number 3. Elizabeth Benson 5. (a) ____ Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Tapestry Park Circle (MUST B FLORIDA STREET AL Registered Office Address ł 515 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: inea NEW Registered Office Address: Mellourne 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

the finited hability 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 organization or the operating agreement of the limited liability company.

UMM Signature of a member or authorized representative of a member

Elizabeth Benson

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 in writing of this change.

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Signature of Registered Agent

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