LI7 000 114568

(Requestor's Name)			
(Address)	400355697774		
(Address)			
(City/State/Zip/Phone #)			
(Business Entity Name)	11/30/2001010013 **425.00		
(Document Number)			
Certified Copies Certificates of Status	2628		
Special Instructions to Filing Officer:	2628 HOV 30		
	S. YOUNG 55		

Office Use Only

COVER LETTER

	gistration Section ission of Corporations				
SUBJECT:	Betnangab LLC				
	Name of Limited Liability Company				
Dear Sir or	Madam:				
The enclose	d Registered Agent/Registered	Office Change an	d fee(s) are submitted for filing.		
Please retur	n all correspondence concernin	g this matter to the	e following:		
Chant Karaji	ian				
	Name of Person				
10 Stars Prop	perty Management LLC				
	Firm/Company				
8200 66th St	N Suite 2A				
· · - · - · ·	Address				
Pinellas Park	k, FL 33781				
	City/State and Zip Co	de			
manager@10	Ostarshomes.com				
E-mai	address: (to be used for future	annual report noti	fication)		
For further i	information concerning this ma	tter, please call:			
Chant Karaji	an	844 at (707-3773		
	Name of Person		Area Code & Daytime Telephone Number		
Reg Div P.O	iling Address: gistration Section vision of Corporations b. Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enc	closed is a check for the follow	ing amount:			
	25 Filing Fee		\$55 Filing Fee & Certified Copy		
INHS18 (2/1-	4)				

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.

2. (a)	8200 66 th St N	(ì	8200 66 th	n St N
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 2A		Suite 2A	
	Pinellas Park, FL 33781		Pinellas Pa	ırk, FL 33781
	05/24/2017		L17000114	568
3. 5. (a)	Date of filing/registration in Florida GARNIER, OLIVIER	4.		Document number
. (.,	Registered Agent and Registered Office shown on the record 10225 ULMERTON ROAD	ds of the Florida	Dept. of State	- ::
	Registered Office Address (MUST BE FLORIDA STRE SUITE 9C	EET ADDRES	<u>S)</u>	2729 HOV 30
	Largo	, FL_33771		7.30
(b)	10 Stars Property Management LLC			O:
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ered Office ad	ldress:	
	8200 66th St N			
	NEW Registered Office Address:			-
	Suite 2A			-
	Pinellas Park	, FL		_
change igent v was/wo he arti	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the member cles of organization or the operating agreement of	the registered liability eders of the lim	ed office and empany, it is sited liability	If the business office of the registered thereby confirmed that the change(s) y company or as otherwise provided in
noventi Al-	Inti Alain	Inno	ocenti Alain	
	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi he obl to merc	by accept the appointment as registered agent and ons of all statutes relative to the proper and comping igations of my position as registered agent as provely reflect a change in the registered office address I in writing of this change.	ete performi	ance of my a	luties, and I am familiar with and accept

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

Signature of Registered Agent