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Division of Corporations

Fax Number : (850)617-6383

From:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081 Phone : (307)200-2803

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LLC REGISTERED AGENT CHANGE **BARLOVENTO LLC**

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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.

. Na	me of the limited liability company: BARLC	VENTO L	.LC		
2. (a)	1039 NORTHERN WAY	9 NORTHERN WAY (b) 1039 NORTHE			
(a)	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	WINTER SPRINGS, FL 32708	<u>Wi</u>	NTER SPRINGS, FL 32708		
	06/13/2017	 L170	000129060		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	MARTHA E PULTZ				
	Registered Agent and Registered Office shown on the records 1039 NORTHERN WAY Registered Office Address (MUST BE FLORIDA STRE.				
	WINTER SPRINGS	_{FL} 32708			
(b)	Northwest Registered Agen				
	Enter name of NEW Registered Agent and/or NEW Register	ered Office address:	202		
	7901 4th St N		2021 JAN 27	¥ ;;	
	NEW Registered Office Address:		127	2. æ.∵.	
	STE 300			, 1	
	St. Petersburg	. FL_33702	PZI JAN 27 AH 8: 40	3 E7	
If the l	limited liability company is not organized under the	laws of the State		îter	

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 ease 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.

Signature of a member or authorized representative of a member 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 abilited in writing of this change.

Glover - Assistant Secretary

Signature of Registered Agent