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TO:

Registration Section
Division of Corporations

THE BANDHA GROUP II L.L.C SUBJECT: 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: Avri Ben-Hamo Name of Person Ben-Hamo Law, PLLC Firm/Company 2701 NW 2nd Ave. Suite 207 Address Boca Raton, FL 33431 City/State and Zip Code meisenbergn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nancy Meisenberg Area Code & Daytime Telephone Number Name of Person Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 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.

a)	mn Leaves Dr., Port Orange, FL 32128	(b)	
	ncipal office address of limited liability compar (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
05/14/201	9		000130019
]	Date of filing/registration in Florida	4.	Document number
(a) Ben-Ham	o Law		
	Agent and Registered Office shown on the rec	ords of the Florida Dep	ot. of State: SECTION NALL STATE OTHER STATE STATE
-	Office Address (MUST BE FLORIDA ST	REET ADDRESS)	
2701 NW	2nd Ave., Suite 118	<u></u>	2 2
Boca Rat	on	FI 33431	S22 4 54
.b)	D Law, PLLC		AH 9: 12 SSEF. FILE
Enter name	of NEW Registered Agent and/or NEW Reg	tistered Office address	<u>5</u> :
NEW Reg	istered Office Address:		
	7 2nd Ave., Suite 207		
Boca Rat	on	, FL	<u>. </u>
nge or change nt will be iden were authori	es are made, the Florida street address ntical. Or, in the case of a Florida lim	of the registered of ited liability compa ibers of the limited	te of Florida, it is hereby confirmed that after the ffice and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.
	Nancy Meisenb		feisenberg
Danum			

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

Signature of Registered Agent