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## **COVER LETTER**

TO: Registration Section Division of Corporations					
Bellagawjas, LLC SUBJECT:	Bellagawjas, LLC				
	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:					
Shannon Stahlin					
Name of Person	<del></del>				
Direct Incorporation					
Firm/Company					
315 W Huron St Ste 240					
Address	<del></del>				
Ann Arbor, MI 48103					
City/State and Zip Code					
documents@directincorp.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Shannon Stahlin	877 2816496				
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	■ \$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.

l. Na	ume of the limited liability company: Bellagawjas,	LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	09/23/2019		000240151
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	BELIZAIRE, MARTHE  Registered Agent and Registered Office shown on the records o	Calin Dinaldo Dina	
	2301 LAKE WESTON DR APT 1223	i the Piorida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
(1)	Orlando F Universal Registered Agents, Inc.	12810	FIL 2019 MOV 20 SECRETARY TALLAHASSE
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		SA O F
	1317 California Street  NEW Registered Office Address:		PH 2: 06
	Tallahassee	 L 32304	
the cha agent v was/we	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registered liability compar of the limited I	l office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in
	sture of a member or authorized representative of a member	Shanno	n Stahlin
l here provisi the obl to merc	by accept the appointment as registered agent and agions of all statutes relative to the proper and completing in the proper and completing as the proper and completing as the proper agent as providely reflect a change in the registered office address, if an artiful of this change.	e performance ( led for in Chapt I hereby confirm	of my duties, and I am familiar with and accep er 603, F.S. Or, if this document is being filed n that the limited liability company has been
Signatu	Kent Dockwell King of Registered Agent	ent Rockwell	, universal Registered Agents, Inc.