L21000479697

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COVER LETTER

то:	Registration Section Division of Corporations				
SUBJ	Biltmore Capital Management L	LC			
		Name of Limited L	iability Company	_	
Dear S	Sir or Madam:				
The e	nclosed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.		
Please	return all correspondence concerning	g this matter to the	following:		
Rapha	el Benaroya				
	Name of Person				
Biltmo	ore Capital Management LLC			~	- -
	Firm/Company		_	22 OCT	1800-181
2000 I	sland Blvd, Apt. 2709			117	
	Address			PH	
Avent	ura, FL 33160			9: 27	지 원칙 25년
	City/State and Zip Coo	de		_	<u>-</u>
aviva.	binc@gmail.com				
	E-mail address: (to be used for future	annual report notif	ication)		
For fu	rther information concerning this ma	tter, please call:			
Rapha	el Benaroya	201 at (937-2712		
	Name of Person		Area Code & Daytime Telephone Num	ber	
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the follow	ving 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.

2. (a								
	ı) –	2000 Island Blvd		(b) 2000 Island Blvd				
_ (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(~)	М	ailing address of limited (Note: MAY BE POS)	-	
		Apt. 2709			Apt 2709			
		Avetura, FL 33160	_		Aventura, Fl	L 33160		
		11/09/2021		L	.2100047969	7		
3.		Date of filing/registration in Florida	4.	_	Ī	Document number		·. <u>-</u>
5. (a)	United Corporate Services						
J. (٠,	Registered Agent and Registered Office shown on the records of	he Flo	rida I	Dept. of State:			
		Registered Office Address (MUST BE FLORIDA STREET A	1DDRI	ESS)				
		3458 Lake Shore Drive					22	<u>3</u> ,
		Tallahassec	32312	2				77 - 12 - 13 - 13 - 13 - 13 - 13 - 13 - 13
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					00117	4 5.
(b)						₽¥	1-4 3 14
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	add:	ress:		ن د بې	
		Raphael Benaroya					9: 27	
		NEW Registered Office Address:						
		2000 Island Blvd, Apt 2709						
		Aventura , FL	33160)	-			
chan agen was/ the a	ge t w we rti	mited liability company is not organized under the law or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	regist bility f the l	ered con limit	l office and npany, it is leed liability	the business office hereby confirmed the company or as other	of the i	registered change(s)
		trafficael (Control of a member or authorized representative of a member	R	apha	el Benaroya			
Sig	nat	ure of a member or authorized representative of a member	_	-	1	Printed or typed name o	f signee	
provi the o to me	bli ere iea	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete is gations of my position as registered agent as provided by reflect a change in the registered office address. I have the property of this change.	ee to d perfor l for i sereby	act ii rmar n Ch r con	n this capac ace of my du apter 605, firm that th	city. I further agree uties, and I am fami F.S. Or, if this doct e limited liability co	to com liar wii ument i ompany	nply with the th and accept is being filed y has been

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