

L24000262525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

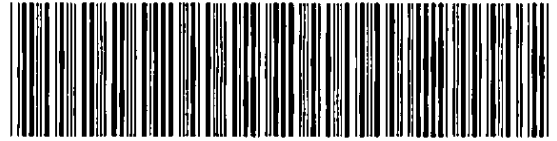
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SUBJECT: Analytica BMS LLC

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Nicolas X. Lopez Mora

Analytica BMS LLC

1805 Ponce de Leon, Apt 825

Coral Gables, Florida 33134

nicolas.lopez3@outlook.com

For further information concerning this matter, please call:

786

at (

Area Code & Daytime Telephone Number

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

■ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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.

1. Name of the limited liability company: Analytica BMS LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

1805 Ponce de Leon, Apt 825

Coral Gables, Florida 33134

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

1805 Ponce de Leon, Apt 825

Coral Gables, Florida 33134

June 8, 2024

1,24000262525

3. Date of filing/registration in Florida 4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Nicolas X. Lopez Mora

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1155 Brickell Bay Dr. Apt. 2803

Miami, FL 33131

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1805 Ponce de Leon, Apt 825

Coral Gables, FL 33134

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 case 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.

Nicolas X. Lopez Mora
Signature of a member or authorized representative of a member

Nicolas X. Lopez Mora

Printed or typed name of signer

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 notified in writing of this change.

Nicolas X. Lopez Mora
Signature of Registered Agent

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