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(((H240003383213)))



H2400033832134BC-

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: INCFILE.COM LLC Account Name Account Number : 120220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

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LLC REGISTERED AGENT CHANGE BNKUP MIAMI GLOBAL CONSULTING LLC

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COVER LETTER

(((H24000338321 3)))

TO: Registration Section Division of Corporations		
BNKUP MIAMI GLOBAL CONS SUBJECT:	ULTING LL	C
	me of Limi	ted Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	Tice Change	e and fee(s) are submitted for filing.
Please return all correspondence concerning t	his matter to	the following:
LOVETTE DOBSON		
Name of Person		
Firm/Company		
17350 STATE HWY 249 STE 220		
Address		
HOUSTON, TX 77064		
City/State and Zip Code		
EFILE) 234@INCFILE.COM		
E-mail address: (to be used for future an	nual report	notification)
For further information concerning this matte	r. please cal	ł:
LOVETTE DOBSON	at 1	888-462-3453
Name of Person	at (Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, 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 followin	g amount:	
■ \$25 Filling Fee		☐ \$55 Filling Fee & Certified Copy
INHS18 (2/14)		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY (((H24000338321 3)))

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.

N	ame of the limited liability company: BNKUP MIAM	II GLOBA	L CONSUL	ring LLC	
(a)	4805 NW 79TH AVE STE 10	((b) 4805 NW 79TH AVE STE 10		
(.,)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		, 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	DORAL, FL 33166	-	DORAL.	FL 33166	
	09/25/2024		1.24000418	3157	
	Date of filing/registration in Florida	4.		Document number	
(a)	LUIS FERNANDEZ				
(4)	Registered Agent and Registered Office shown on the records of 4805 NW 79TH AVE STE 10	of the Floric	la Dept. of Sta	te:	
	Registered Office Address	<u>T ADDRES</u>	<u>(S)</u>		
	DORAL.	33166 FL	į		
			 -~		
(b)	REPUBLIC REGISTERED AGENT LLC Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>			282's OU T	
	Enter name of NEW Registered Agent and/or NEW Register	ed Office a	ddress:	·. 1 1	
	1130 Nw 72nd Ave Tower 1 Ste 455			9	
	NEW Registered Office Address:			P112: 37	
				79	
				- 37	
	Miami	33126			
iange jent v as/w	Miami imited liability company is not organized under the lear changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the ne register liability c s of the lin ne limited	ed office ar ompany, it i nited liabilit	orida, it is hereby confirmed that af nd the business office of the register is hereby confirmed that the change ty company or as otherwise provide	
igna	ture of a member or actionized representative of a member			Printed or typed name of signee	
visi obl ner	by accept the appointment as registered agent and aginous of all statutes relative to the proper and completing tions of my position as registered agent as providely reflect a change in the registered office address, all in writing of this change.	Te nerform	ance of my	duties, and I am familiar with and acc	
Signatu	re of Registered Agent				