#N08000004120

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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K. SALY EXAMINER

NOV 2 0 2013

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: BEOABUFLDER, COM, LLC			
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 ma	atter to the following:		
DEUUTS CUMTNIGHAM Name of Person			
BIOABUTUDER. COM, CLC Firm/Company			
3601 PGA BLUD STETE GOO Address			
PACITY/State and Zip Code City/State and Zip Code			
Blittany @ Browstoff (on E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
DEWES CONTUBIAN at (561) 290-0028			
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301			
Enclosed is a check for the following amount:			
\$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 608.416 or 608.508, 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: BIDABUT	welliam, uc
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	704 000 000 000
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME S
9 9 8 3. Date of filing/registration in Florida 4	M08000004120 2 7
5. (a) Registered Agent and Registered Office shown on the	
Registered Agent:	DEULES CONTURMANTES &
Registered Office Address:	OUND BEACH, FC 33408
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	DEMES CUMEULHAM
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3801 PEAR BLUD SITTE GOD
If the limited liability company is not organized under the lace confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) when members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the program I am familiar with and accept the obligations of my possional chapter fold, F.S. Or, if this document is being filed to mere address. Thereby confirm that the limited liability company signature of registered agent	ws of the State of Florida, it is hereby rida street address of the registered office ral. Or, in the case of a Florida limited was/were authorized by an affirmative vote of a provided in the articles of organization or expression of the provided in the articles of organization or expression as registered agent as provided for in the registered office has been notified in writing of this change.
Division of Corporations, P.O. Box 632 FILING FEE: \$25	