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TO:	Amendment S Division of Co		
SUBJI	ECT: BNI	Top Shelf Professionals	Inc.
		Name of Corporation	



DOCUMENT NUMBER: N12 Ø Ø Ø Ø Ø 9395

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephanie Mackay				
Name of Contact Person				
Firm/Company				
3521 Ferndell				
Address				
Sarasota, FL 34235				
City/State and Zip Code				

Stephanie. T. mackay e gmail. com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person at (941) 264-7428

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 61 statement of change is submitted for a corporation organized under the law in order to change its registered office or registered agent, or both	s of the State of Florida			
1. The name of the corporation: BNI Top Shelf Professionals, Inc.				
2. The principal office address: 3521 Ferndeu				
Sartisota, Pl 34235				
3. The mailing address (if different):				
4. Date of incorporation/qualification: /0/02/2012 Document n	umber: <u>N12ØØØØØ9395</u>			
5. The name and street address of the current registered agent and registered Florida Department of State: (If resigned, enter resigned)	d office on file with the			
<u>Carol Piper</u>				
2325 Desoto Rd.				
Sarasota, FL 34234				
6. The name and street address of the new registered agent (if changed) and (if changed):	/or registered office			
Stephanie Mackay				
3521 FerndeU				
P.O. Box NOT acceptable Sarasota, FL 34235	in the state of th			
The street address of its registered office and the street address of the bus as changed will be identical.	iness office of its registered agent,			
Such change was authorized by resolution duly adopted by its board of di authorized by the board, or the corporation has been notified in writing of	rectors or by an officer so the change.			
Signature of an officer or director Stephanic	e Mackay or typed name and thie			
I hereby accept the appointment as registered agent and agree to act in the I further agree to comply with the provisions of all statutes relative to the performance of my duties, and I am familiar with and accept the obligation agent. Or, if this document is being filed merely to reflect a change in the hereby confirm that the corporation has been notified in writing of this change.	nis capacity. proper and complete on of my position as registered e registered office address, I nange.			
Signature of Registered Agent 12-1.	2-17 Date			
If signing on behalf of an entity:				
Stephanie Mackay Typed or Printed Name				

* * * FILING FEE: \$35.00 * * *