

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

: (305)634-3694

Fax Number

: (305)633-9696

REGISTERED AGENT CHANGE BBB&H, INC.

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Corporate Filing Menu

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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 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of FLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
\mathcal{L}
1. The name of the corporation: BB + H, LWC.
2. The principal office address: 2116 N Hamingo Rd
- Pan Broke fives to 33028
3. The mailing address (if different): 135 August A / Gensel
- ROMM SPRINGS 76 33071
4. Date of incorporation/qualification: 4/28/05 Document number: Pos000133 203
5. The name and street address of the current registered agent and registered office on file with the
Plorida Department of State:
CORPORATE GRESTIONS NETWORK /ex
CORPORATE STEATIONS TO ETWORK I EE
11380 PROSPERITY TAPAS Rd #221 E
PHM PLACE COANGENS TO 35410
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
_ MIRTA CHEDIAL _ SE +
Car Car
3599 2 UNI USINS 174 MC 506 7
(7.0. Box NOT acceptable)
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
· · · · · · · · · · · · · · · · · · ·
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Region Const
(Printed of an officer or director) (Printed or typed hame and units)
· · · · · · · · · · · · · · · · · · ·
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation was been notified in writing of this change.
of my values, and I am familiar with and accept the configuron of my position as registered agent. Or, if ints document is being filed merely to reflect a change in the registered office address. I hereby confirm that the
corporation bein been notified in writing of this change,
7/1/12
(Signature of Registered Agent) (Class)
(f signing on behalf of an entity:
Mirta Chediak

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahasser, FL 32314 CR2E045 (8/05)

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

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(Typerior Printed Name)