**Division of Corporations Public Access System** 

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Division of Corporations

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REGISTERED AGENT CHANGE

BENA BROTHERS INC.

Certificate of Status Certified Copy O Page Count 02 Estimated Charge \$43.75

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Help

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

Pursuant to the	e provisions of sections 607.0502,	617.0502, 607.1508, or 617.1508, Florida Statutes
this statement of	of change is submitted for a corpora	tion organized under the laws of the State of
Florida	in order to change its regist	ered office or registered agent, or both, in the State
of Florida.		
1. The name of	the corporation: Bena Brothers Inc.	
2. The principal	l office address: 8988 NW 53rd Cou	rt, Sunrise, Florida 33351
3. The mailing	address (if different):	
4. Date of incor	poration/qualification: 4/5/2006	Document number: P06000049316
5. The name an Florida Depa	d street address of the current register from the state:	ered agent and registered office on file with the 💆
	Business Filings Incorporated	· ·
	1203 Governors Square Blvd., Suite	9 101
	Tallahasse, Florida 32301	
6. The name as changed):	nd street address of the new registr	ered agent (if changed) and /or registered office (if
•	8988 NW 53rd Court	
	(F.O. Box or personal m	sailbox NOT acceptable)
	Sunnise, Florida 33351	
The street addreagent, as chang	ess of its registered office and the s ed will be identical.	treet address of the business office of its registered
Such change w authorized by t	as authorized by resolution duly ad be board, or the corporation has been	opted by its board of directors or by an officer so notified in writing of the change.
Malle		Jili Bena, President
(1)	r, chairman of vice chairman of the board)	(Printed or typed name and title)
perjormance oj registered agen	my duties, and I am jamiliar with the interest of this document is being file	nt and agree to act in this capacity. I statutes relative to the proper and complete and accept the obligation of my position as ad merely to reflect a change in the registered on has been notified in writing of this change.
my 1		20/05/01
-	Dignature of Registered Agent)	(Date)
If signing on behal	i of an entity:	
7	Typed or Printed Name)	(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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