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SECRETARY OF STATE

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R.A. Change

TR 10/7/XV

## **COVER LETTER**

BCG SYSTEMS, Inc. **SUBJECT:** (Name of Corporation) 20-4956979 DOCUMENT NUMBER:\_ 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: **SILVINA GATTINO** (Name of Contact Person) BCG SYSTEMS Inc. (Firm/Company) 8208 NW 64th St. (Address) Miami, FI 33166 (City/State and Zip Code) For further information concerning this matter, please call: Silvina Gattino (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section **Division of Corporations Division of Corporations** 

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

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

statement of char	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of FLORIDA
	to change its registered office or registered agent, or both, in the State of Florida.
	ne corporation: BCG: Systems, Inc.
2. The principal of	office address: 8208 NW 64th St Miami, FI 33166
3. The mailing ac	ldress (if different):
4. Date of incorp	oration/qualification: May-25th 2006 Document number: 20-4956979
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the ment of State:
	Silvina Gattino
	8208 NW 64th St Miami, FI 33166
	2008 SE TAL
	LICE SET
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office PSS
	Silvina Gattino
	2899 Collins Ave #1105 - Miami Beach, FL 33140
	(P.O. Box NOT acceptable)
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
(Standard	Silving Octhino - President  (Printed or typed name and title)
I harahy areant	the appointment as registered agent and agree to act in this capacity.  o comply with the provisions of all statutes relative to the proper and complete performance all am familiar with and accept the obligation of my position as registered agent. Or, if this ag filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
(&ig	Set - 22 nd 2008  (Date)
If signing on bel	
<u>Silvi</u>	va Galino vped or Printed Name)

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