P07000088882

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
		:
	*	

Office Use Only



600108637226

08/27/07-01020-031 **35.00

O7 AUG 27 PM 1:54
SECRETARY OF STATE
ALLAHASSEF FLORIGO

or to so I

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: BM WORLD FINANCE CORP.			
(Name of Co	rporation)		
DOCUMENT NUMBER: P07000088882			
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:		
LUISA MARUSSI BARBOZA (Name of Contact Person)			
(, 01 00			
BM WORLD FINANCE CORP.			
(Firm/Company)			
5721 SW 73 ST.			
(Addre	ess)		
MIAMI FL 33143			
(City/State and Zip Code)			
For further information concerning this matter, please ca	all:		
LUISA MARUSSI BARBOZA	at (786) 246 8877		
(Name of Contact Person)	(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 statement of change is submitted for a corporation of in order to change its registered office or re	
1. The name of the corporation: BM WORLD FINAN	CE CORP.
2. The principal office address: 5721 SW 73 ST, B	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 08- 07 2007	Document number: P07000088882JOSE
5. The name and street address of the current register Florida Department of State:	
JOSE LUIS BARBOZA	ARY ARY
20714 SW 81 CT.	E F S
MIAMI FL 33189	08.00 08.00
6. The name and street address of the new registered (if changed):	`~~
5721 SW 73 ST.	
MIAMI FL. 33143 (P.O. Box NOT accept	ptable)
The street address of its registered office and the stas changed will be identical.	treet address of the business office of its registered agent,
Such change was authorized by resolution duly adeauthorized by the board, or the corporation has been	opted by its board of directors or by an officer so in notified in writing of the change.
(Sugnature Signifulation or director)	LUISA MARUSSI BARBOZA VICEPRESIDENT (Printed or typed name and title)
	nt and agree to act in this capacity. I statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the ange
Maxwer 6	08-21-2007
(Signature of Registered Agent) If signing on behalf of an entity:	(Date)
(Typed or Printed Name) * * * FILING	G FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314