

P 14000021752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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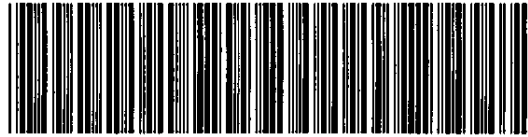
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BMN FINANCIAL GROUP INC.
Name of Corporation

DOCUMENT NUMBER: P14000021752

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:

Alfredo Bizzarri

Name of Contact Person

BMN FINANCIAL GROUP INC.

Firm/Company

Via Mirabili 119

Address

Campoli 64012 Italy

City/State and Zip Code

bmnfinancialgroup@yahoo.com

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

For further information concerning this matter, please call:

Alfredo Bizzarri

Name of Contact Person

at ()

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 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.

1. The name of the corporation: BMN FINANCIAL GROUP INC.
2. The principal office address: via Mirabili 119, Campli, Italy, 64012
3. The mailing address (if different): via Mirabili 119, Campli, Italy, 64012
4. Date of incorporation/qualification: 03/11/2014 Document number: P14000021752
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Carol Lee
7760 NW 78th Ave #112
Tamarac, FL 33321

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

REGISTERED AGENTS INC.
3030 N. Rocky Point Drive, STE 150A
P.O. Box NOT acceptable
Tampa, FL 33607

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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.

Alfredo Bizzarri
Signature of an officer or director

Alfredo Bizzarri

Printed or typed name and title

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 has been notified in writing of this change.

Bill Havre
Signature of Registered Agent

12/10/2014

Date

If signing on behalf of an entity:

Bill Havre - President

Typed or Printed Name

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