## P140000 81453

(Re	equestor's Name)	
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
C11D-I	Balzano Informatics Inc.
SUDJ	Name of Corporation
DOCU	JMENT NUMBER: P14000081453
	aclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Rene Balzano
	Name of Contact Person
	Firm/Company
	16025 Ternglade Dr
	Address
	Lithia, FL 33547
	City/State and Zip Code
	rene@balzano.net
	E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
Re	ne Balzano8135709797
	ne Balzano at (813 ) 5709797  Name of Contact Person Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327  Street Address: Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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

	provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this nge 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.
1. The name of th	he corporation: Balzano Informatics Inc.
2. The principal of	office address: 1110 SW 28th Street, Cape Coral, FL 33914
(chause	d to Go! N Ashley Dr., Svite llas-9354, Taupa, FC35602 Wo
3. The mailing ac	ddress (if different): 16025 Ternglade Dr, Lithia, FL 33547
4. Date of incorp	poration/qualification: 3/9/2012 Document number: P14000081453
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
-	Best Florida Consulting LLC
-	1110 SW 28th Street
	Cape Coral, FL 33914
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered of A
-	Telle Dalzailo
_	16025 Ternglade Dr
	r.o. Box NOT acceptance
-	Lithia, FL 33547
The street addres as changed will b	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	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.
Signature	REWE RACZANO, Propriodust
I further agrée to nerformance of n	the appointment as registered agent and agree to act in this capacity.  It comply with the provisions of all statutes relative to the proper and complete involuties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I hat the corporation has been notified in writing of this change.
Signa	PEXERACIANO E/5/19 ature of Registered Agent Date
If signing on beh	alf of an entity:
Ten	ped of Printed Name
124	* * * FILING FEE: \$35.00 * * *

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