P15000023600

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FILED SEGRETARY OF STAGE DIVISION OF CORPORATION

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT, BDC INVESTMENT GROUP INC

Name of Corporation

OCUMENT NUMBER, P15000023600

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:

Yoochul Chong

Name of Contact Person

Firm/Company

5668 E 61st St

Address

Commerce CA 90040

City/State and Zip Code

ychong@attorneyscorpservice.com

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

For further information concerning this matter, please call:

Yoochul Chong

.800

4625487

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

statement of chi	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, the organized under the laws of the State of FL arrespondent registered agent, or both, in the State of Florida.	is
1. The name of	the corporation: BDC INVES	TMENT GROUP INC	
	office address: 1850 HOME BEACH, FL 33445	WOOD BLVD APT 101	
3. The mailing	address (if different):		
4. Date of incor	poration/qualification; 03/11/2	2015 Document number: P1500002360	0
	d street address of the current regi	istered agent and registered office on file with the resigned)	
	CHARLES, BRENDA		
	1850 HOMEWOOD BL	VD APT 101	
	DELRAY BEACH, FL 3	3445	31410 211
6. The name and (if changed):	d street address of the new registe	red agent (if changed) and /or registered office	SION OF
	LEGALINC CORPORA	TE SERVICES INC.	- 2
	5237 SUMMERLIN CO	MMONS, SUITE 400	AM IO: 5
	FORT MYERS, FL 339	Box NOT acceptable	<u>ର</u> କୁ
	ess of its registered office and the	e street address of the business office of its registered adopted by its board of directors or by an officer so been notified in writing of the change.	l ag e nt,
_		BRENDA CHARLES	
	nda Chuleo re of an officer or director	Printed or typed name and title	
I hereby accept I further agree performance of agent Or, if th hereby confirm	the appeintment as registered a to comply with the provisions of my duties, and I am familiar wit is document is being filed merely that the corporation has been no	gent and ugree to uct in this cupuelty. all statutes relative to the proper and complete h and accept the obligation of my position as register to reflect a change in the registered office address, stified in writing of this change.	red I
		4/22/15	
Sig	nation of Registered Agent	Date	
If signing on be	half of an entity:		
Anna Manu		_	
T	ypod or Printed Name		

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

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

CR2E045 (03/12)