P16000035387

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Account Number : 110432003053
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE
BHH BENEFITS USA, INC.

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Page Count	02
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BHH BENEFITS USA, INC.
Name of Corporation

DOCUMENT NUMBER: P16000035387

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:

Ron Hansell
Name of Contact Person

BHH BENEFITS USA, INC.
Firm/Company

1494 Borghese Lane, #301
Address

Naples, Florida 34114
City/State and Zip Code

r.hansell@bhhbenefits.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Courtney L. Scanlon at (716) 848-1538
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, 617.0502, 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: BHH BENEFITS USA, INC.
2. The principal office address: 1494 Borghese Lane, #301, Naples, Florida 34114
3. The mailing address (if different):
4. Date of incorporation/qualification: 04/20/2016 Document number: P16000035387
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)

   HANSELL, RON

   740 N COLLIER BLVD., CONDO 402

   MARCO ISLAND, FL 34145

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

   HANSELL, RON

   1494 Borghese Lane, #301

   P.O. Box NOT acceptable

   Naples, Florida 34114

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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.

Signature of officer or director — RON HANSELL, President (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.

Signature of Registered Agent — 06/01/2017 (Date)

If signing on behalf of an entity:

Typed or Printed Name

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

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

CR2E045 (03/12)