P160000 78252

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name))
(Do	ocument Number)	
Certified Copies	_ Certificates of	f Status
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Bonino Corp.

Name of Corporation

DOCUMENT NUMBER, P1

P16000078252

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:

Filippo Oliva

Name of Contact Person

Funaro & Co P.C.

Firm/Company

1221 Brickell Avenue, Ste 1160

Address

Miami, FL 33131

City/State and Zip Code

filippo.oliva@funaro.com

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

For further information concerning this matter, please call:

Filippo Oliva

305

7127131

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 cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: Bonino Corp.
2. The principal	office address: 1221 Brickell Avenue, Ste 1160
Miami, FL	
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: Document number: P16000078252
5. The name and	d street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Filippo Oliva
	1111 Brickell Avenue, Ste 2650
	Miami, FL 33131
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office Filippo Oliva
	Filippo Oliva 1221 Brickell Avenue, Ste 1160
	شهرون
	P.O. Box NOT acceptable
	Miami, FL 33131
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signatur	PAOLO BONINO (PNESIDENT) Te of an officer or director Printed or typed name and time
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, 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 that the corporation has been notified in writing of this change.
	- ho/19/2016
/	nature of Registered Agent Date
ir signing on bel	half of an entity:
Ty	yped 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
5 (03/12)