PA3000003555

(Requestor's Name)	_
(Address)	_
(Address)	_
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(Oity/Otate/Elp/Choite #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer: HORNE	
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: BGI US CAPITAL CORP Name of Corporation	
DOCUMENT NUMBER: P23000003835	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
TODD N. ROSENBERG, ESQ.	
Name of Contact Person	
PACKMAN, NEUWAHL & ROSENBERG PA	
Firm/Company	
8950 SW 74 CT #1901	
Address	
MIAMI, FL 33156	
City/State and Zip Code	
ATRIUM@PNRLAW.COM	
E-mail address: (to be used for future annua	l report notification)
For further information concerning this matter.	please call:
MARITZA BETANCOURT	at (305)665-3311 Area Code & Daytime Telephone Number
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	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age 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.
<u> </u>	ne corporation: BGI US CAPITAL CORP
2. The principal of	office address: 175 SW 7 ST STE 1618 MIAMI, FL 33130
3. The mailing ad	Idress (if different): 8950 SW 74 CT #1901, MIAMI, FL 33156
4. Date of incorpo	oration/qualification: JANUARY 11, 2023 Document number: P23000003835
5. The name and Florida Departs	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
	PEDRO SANCHEZ
-	175 SW 7 ST, STE 1618
- -	MIAMI, FL 33130
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office ATRIUM REGISTERED AGENTS, INC.
_	ATRIUM REGISTERED AGENTS, INC.
	8950 SW 74 CT, SUITE 1901
	P.O. Box NOT acceptable MIAMI, FL 33156
The street address as changed will l	ss of its registered office and the street address of the business office of its registered agent, by identical.
	s authorized by resolution duly adopted by its board of directors or by an officer so e board, of the corporation has been notified in writing of the change.
(ANTONIO BELTRAN GARCIA
I hereby accept to I further agree to of my duties, and document is being	the appointment as registered agent and agree to act in this capacity. of one play with the provisions of all statutes relative to the proper and complete performance of a maniliar with and accept the obligation of my position as registered agent. Or, if this are filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Sign	nature of Registered Agent Date
If signing on bel	half of an entity:
TODD N. ROSEN	
ıy	ped 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 (04/13)