P94000010447

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	ry/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nai	me)	
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·	
Certified Copies	_ Certificate	s of Status	
Special Instructions to Filing Officer:			





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OCT 1 2 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations Bruno Brothers Inc. Name of Corporation P94000010447 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: Kathleen Reed Name of Contact Person Firm/Company 15670 Old Olga Rd. Alva, FL 33920 City/State and Zip Code SUNBIZ@CallForKathy.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kathleen Reed Name of Contact Person

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	nge is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statute. ized under the laws of the State of <mark>Florida</mark> ered agent, or both, in the State of Florida		-
1. The name of	the corporation: Bruno Brothers In office address: 15670 Old Olga R	С.		<u> </u>
3. The mailing a	ddress (if different):			
4. Date of incor	poration/qualification: 02/02/1994	Document number: P94000010)447	
	d street address of the current registered a trment of State: (If resigned, enter resigned	gent and registered office on file with the d)		
	Kathleen Reed			
	5260 S. Landings Dr. #1503			
	Fort Myers, FL 33920			
6. The name and (if changed):	l street address of the new registered ager	nt (if changed) and /or registered office		200
	Kathleen Reed			<u>.</u>
	15670 Old Olga Rd.			ට ක•
	P.O. Box NOT Alva, FL 33920		::: ⊋7.	AH 3:
The street addr.		addracs of the business office of its regis	<u> ជ</u> ាកា) () (
_		address of the business office of its regis		,111,
Such change was authorized by the	as authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an officer ified in writing of the change.	SO	
Mes	MM	Mark Bruno		_
I hereby accept I further agree performance of agent. Or. if th	the appointment as registered agent and to comply with the provisions of all state my duties, and I am familiar with and a is document is being filed merely to reflect that the corporation has been notified in	ccept the obligation of my position as reg ect a change in the registered office addr	gistered ·ess, I	
Y ast	Min Kecol	08/27/2016		
_	nature of Registered Agent	Date		_
If signing on be	half of an entity:			
т	yped or Printed Name			

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