5 15945

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
. PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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SECRETARY OF STATE
TALLAHASSEE, FLORIO

RA Change C.COULLIETTE MAR 31 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: B.C.N.E.S., INC.				
(Name of Co	orporation)			
DOCUMENT NUMBER: S15945				
	/A			
The enclosed Statement of Change of Registered Office	•			
Please return all correspondence concerning this matter	to the following:			
Tami Passley				
(Name of Contact Person)				
	,			
Lowndes, Drosdick, Doster, Kantor & Reed, P.A.				
(Firm/Co	mpany)			
215 N. Eola Drive				
(Addr	ress)			
Orlando, Florida 32801				
(City/State an	d Zip Code)			
For further information concerning this matter, please c.	•			
•				
Tami Passley	at (407) 418-6785 (Area Code & Daytime Telephone Number)			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Departs	ment of State.			
	•			
Mailing Address: Amendment Section	Street Address:			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee, FL 32301			

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

نوا دا جيو

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S statement of change is submitted for a corporation organized under the laws of the State of <u>fixed</u> in order to change its registered office or registered agent, or both, in the State of Fl	Florida
1. The name of the corporation: B.C.N.E.S., INC.	
2. The principal office address: 1010 NE 5TH AVE, DELRAY BEACH FL 3	3483
3. The mailing address (if different): same as above	
4. Date of incorporation/qualification: 12/03/1990 Document number: S1594:	5
5. The name and street address of the current registered agent and registered office on file wit Florida Department of State:	th the
ANAND PATEL	
1503 BELVEDERE ROAD	•
WEST PALM BEACH FL 33406	-
6. The name and street address of the new registered agent (if changed) and /or registered offi (if changed):	
Jacqueline Bozzuto, Esq.	MAR 2:
215 N. Eola Drive	SHA 7
(P.O. Box NOT acceptable)	AH 9: 17
Orlando, Florida 32801	-84 5
The street address of its registered office and the street address of the business office of its as changed will be identical.	saregistered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an authorized by the board, or the corporation has been notified in writing of the change.	officer so
Anand Patel, President (Signature of an officer or director) Anand Patel, President (Printed or typed name and to	tifle)
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 com of my duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I hereb corporation has been notified in writing of this change.	aplete performance d agent. Or, if this by confirm that the
By: acquelus must	109
If signing on behalf of an entity:	
n/a (Typed or Printed Name)	

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