## M0700000254

(Re	equestor's Name)						
(Ac	idress)						
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(City/State/Zip/Phone #)							
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(Bu	usiness Entity Nar	ne)					
(Document Number)							
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or of the RELIE



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: September 30, 2016

Order#: 296682-109

Re: BLC MANAGEMENT 3, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX \_\_\_ File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Mary Rivers

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. 1	Name of the limited liability company: BLC MANAGEM	IENT 3, I	LC				
2. (a	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (b)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	BRENTWOOD, TN 60611	_					
_	02/07/2007		M0700000				
3.	Date of filing/registration in Florida	4.		Document number			
5. (a	C T CORPORATION SYSTEM						
	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	:			
	1200 SOUTH PINE ISLAND ROAD						
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)					
					ಥಾ	ī.:·.	
	PLANTATION , FL	33324			0CT -1		
(h	) Corporation Service Company					82	
(U	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:				
					.∕> Æ.	25	
	1201 Hays Street				œ	蓬	
	NEW Registered Office Address:						
	Tallahassee F1.	32301					
	, FL_	32301					
the clagent was/v	limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the limited liawere.	the regis bility co f the limi	tered office npany, it is ted liability	and the business office hereby confirmed that company or as otherw	e of the the cha	registered ange(s)	
	Ju E. alnie	Jill C	ilmi, Author	rized Person			
	nature of a member or authorized representative of a member			Printed or typed name of si			
provi the o to me notifi	reby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete publications of my position as registered agent as provided rely reflect a change in the registered office address, I head in writing of this change?	performa I for in C ereby co	nce of my a hapter 605, nfirm that t	luties, and I am familia , F.S. Or, if this docum the limited liability com	r with inent is b ipany h	and accept being filed as been	
Signa	ture of Registered Agent Corporation Service Company	BY: Gr	ace E. Kir	by, Assistant Vice Pro	esiden	t	

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00