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BDP DEVELOPMENT SERVICES FLORIDA, LLC

TYPE OF FILING: CHANGE OF AGENT

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

Pursuant to the provisions of sections 605.0114, 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. Name of the limited liability company: EDP DEVELOPMENT	SERVICES FLORIDA, LLC	10 m	201
2. (a) Principal office address of limited liability compan			X.
(Note: MUST BE STREET ADDRESS)	Suite 430 Chicago, IL 60854	ر المقتر المانيات	<u></u>
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	same as above		N TO
(INIC. INST BE TOOT OF THE BOX)			65 X
7/15/2013	L13000100142	<u></u>	(S) (**
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on	the records of the Florida	a Dept. of State	: :
Registered Agent:	CT Corporation System		
Registered Office Address:	1200 South Pine Is and Road		
	Plantation, FL 33324		
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: NEW Registered Office Address: 155 Office Plaza Drive			
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee FL 32301		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ider liability company, it is hereby confirmed that the change(the members of the limited liability company or as otherwise operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the case of a strict of the case of the	he registered o i Florida limite v an affirmative	ffice d vote of
Ronald T, Frain, MGR of Bridge ASP, LLC, GP of BDP Realty Holdings, LP, MSR Printed or typed name of signee			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 605, F.S. Or, if this document is being filed to it address, I hereby confirm that the limited liability compa	agree to act in this capac roper and complete perfo position as registered age, verely reflect a change in my has been notified in wi	sity. I further a rinance of my nt as provided the registered riting of this ch	igree lo dulies, for in office lange.
Division of Corporations, P.O. Box 6		2314	

INHS18 (12/13)