L14000029056

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
, , , , , , , , , , , , , , , , , , ,						





000296387980

DEPARTMENT OF STATE

SECRETARY OF STATE

K. SALY MAR - 8 2017



NCR National Corporate Research (Hong Kong) Limited, a Hong Kong Limited Company

NCR National Corporate Research (UK) Limited, Registered in England and Wales, Registry # 8010712

Albany • Charlotte • Chicago • Dallas • Dover • Los Angeles • New York • Sacramento • Springfield • Tallahassee • Washington, D.C. • Hong Kong • London

	Account#: I20000000088
Date: 03/07/2017	
Name: Marisa Kugelmann	
Reference #: G030884	
ENTITY NAME: BRIDGE HG ONE, LLC	
Articles of Incorporation/Authorization to Transact Business	
Amendment	
Annual Report	
Change of Agent	
Reinstatement	
Conversion	
Merger	
Dissolution/Withdrawal	
Fictitious Name	
Other: certified copy upon filing	
Authorized Amount: 455.00 Signature: M. Company of the Company of	

COVER LETTER

TO:	Registration Section Division of Corporations				
	·				
SUBJ	SUBJECT: BRIDGE HG ONE LLC Name of Limited Liability Company				
	(ABII)	e Oi Lii	inted Di	ointy C	ompany
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Offi	ce Cha	nge and	fee(s) ar	e submitted for filing.
Please	return all correspondence concerning thi	s matte	r to the f	ollowing	3:
	MAURA NOSKA				
	Name of Person				
	BRIDGE DEVELOPMENT PARTNE	ERS, L	TC		
	Firm/Company				
	1000 W. IRVING PARK ROAD, SU) TE 1	50	_	
	Address	·			•
	ITASCA, IL 60143			_	
	City/State and Zip Code			_	
	MNOSKA@BRIDGEDEV.CC				
7	E-mail address: (to be used for future ann	ual repo	ort notifi	cation)	
For fu	rther information concerning this matter,	please	cail:		
	MAURA NOSKA	at (312	_)_	683-7230
	Name of Person	_		Area C	ode & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:			
	Registration Section	Registration Section			
	Division of Corporations	Division of Corporations			
	Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314				
	Tallahassee, Florida 32301		Tal	lahassee	, Florida 32314
	Enclosed is a check for the following	amour	ıt;		
	□ \$25 Filing Fee		☑ \$ 5	5 Filing	Fee & Certified Copy
INHSI	8 (2/14)				

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.

. Na	me of the limited liability company:		BRIDGE HG ONE LLC
. (a)	1000 W. IRVING PARK ROAD	_ (b)	1000 W. IRVING PARK ROAD
. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SUITE 150	_	SUITE 150
	ITASCA, IL 60143	- -	ITASCA, IL 60143
	10/15/2014		L14000029058
	Date of filing/registration in Florida	4.	Document number
(a)	C T CORPORATION SYSTEM		
(-/	Registered Agent and Registered Office shown on the records of th	e Florida l	Dept. of State:
	1200 SOUTH PINE ISLAND ROA	AD.	
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)	
			324 Ze
	PLANTATION EL	33	324
	PLANTATION , FL_		
(b)	National Corporate Research, Ltd., I	nc.	ا المناسب المن
(0)	Enter name of NEW Registered Agent and/or NEW Registered C		TO 3 1
			F.F. GRAIL
	115 North Calhoun Street, Suite 4	4	
	NEW Registered Office Address:		***
			
	Tallahassee FL_	32	301
e cha gent v as/we e ani	mited liability company is not organized under the laws age or changes are made, the Florida street address of the fill be identical. Or in the case of a Florida limited liability and affirmative vote of the members of cless of organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability and organization or the operating agreement of the liability agreement of t	s of the s he regist bility con the limi imited li	State of Florida, it is hereby confirmed that after tered office and the business office of the registered inpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company.
	ure of a member or authorized representative of a member		Printed or typed name of signee
herel ovisi obli nere iide	by accept the appointment as registered agent and agre ons of all statules relative to the proper and complete p leations of my position as registered agent as provided by reflect a change in the registered office address. I he In writing of this change.	e to act interfering for in Ciercon	in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been
	Man Concarlde Asst. Sely	·Na	trnal Corporate Research, Ltd., .