## A07-000001136

(Requ	uestor's Name)	)
(Addr	ess)	
(Adda	ess)	
(City/	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Docu	ument Number	)
Certified Copies	Certificate	s of Status
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## **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations	
SUBJECT: B7 LLLP	
Name of Limited	d Partnership or Limited Liability Limited Partnership
DOCUMENT NUMBER: A0700	00001136
The enclosed Statement of Chang fee(s) are submitted for filing.	ge of Registered Office and/or Registered Agent and
Please return all correspondence	concerning this matter to:
Penny Bickley	
Contact Per	son
Bickley Realty Advisors LLC	
Firm/Comp:	ny
7221 50th Street N	
Address	<del></del>
Pinellas Park, FL 33781	
City, State and Z	ip Code
psb7396@gmail.com	
E-mail address: (to be used for fut	ure annual report notification)
For further information concernit	ng this matter, please call:
Penny Bickley	at ( 667-0087
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a \$35.00 check made	payable to the Florida Department of State.
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee FL 32303

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

<sub>1</sub> B7 LLLP				
N	ame of Limited Partnership or Limit	ed Liability Limited Partn	ership	
2. October 2, 2007  Date of filing/registration in Florida		3. A07000001136		
		Florida doc	ument number	
4. The name of the r Department of State:	egistered agent and the registered of	Tice address as shown on t	he records of the Florida	
	Frederick L. Bickley Jr			
	Name		_	
	7221 50th Street No			
	Addres	-	7025 JUL - T AH 11:58	
	Pinellas Park, FL 3378			ţ
	City, State a	nd Zip		940 940
5. The name and Fle	orida street address of the new regist	ered agent and/or office:	· · · · · · · · · · · · · · · · · · ·	П
	Penny B. Bickley		量 。	フ
	Name		-	
	7221 50th Street No		₹ <b>6</b>	
	Florida street address (P.O	. Box not acceptable)		
	Pinellas Park, FL	<sub>FL</sub> 33781		
	City, State a	nd Zip	<del></del>	
6. Such change(s) is	are effective when filed by the Flor	ida Department of State.		
morris		nes		
Signature of General	Paytner			
Lhereby accept the a	ppoin <u>tment as reg</u> istered agent and	agree to act in this capaci	ty. I further agree to	
Comply with the prov	isions of all statutes relative to be p h an accept the obligations of my pa	rope <mark>k and complete perfo</mark> i	emance of my duties,	
< Oeleea		Doce)		
Signature of Register	red Agent			
	/ /			
Filing Fee:	\$35.00			

Certified Copy (optional): \$52.50