Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274

Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

REGISTERED AGENT CHANGE BERGMAN, WALLS, & ASSOCIATES, LTD. - ARCHITECTS INC

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C. GOLDEN

SEP 1 7 2018

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COVER LETTER

Name of Corporation

TO: Amendment Section Division of Corporations

BERGMAN, WALLS & ASSOCIATES, LTD. - ARCHITECTS INC.

DOCUMENT NUMBER: F17000000809

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amy Gaines

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Gaines

,,888

705-7274

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

15129570210

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

statement of ch	ange is submitted	tions 607.0502, 617.0 I for a corporation org egistered office or regi	anized under the laws	of the State of	NEVAD		_
	Ü	BERGMAN, WAL	-	•		TECT	ΓS INC.
		709 Valle Ver					
Hender		NV	89015				
3. The mailing	address (if differ	ent):					
4. Date of incor	rporation/qualific	ation: 02/20/20	17 Document nu	mber: F170	00000	080	9
		of the current registered If resigned, enter resig		office on file v	vith the		
	C T COR	PORATION S	SYSTEM		<i>U;</i> (□	201	
	1200 SO	UTH PINE IS	LAND ROAD		ALL.	2018 SEP 14	77
	PLANTA	TION, FL 333	24		AHA:	<u>+</u>	
6. The name an (if changed):		of the new registered a	gent (if changed) and a	or registered o	SSET, F	AM 10: 38	
Registered Agent Solutions, Inc.					38		
	155 Office	Plaza Dr., Suite	A				
		P.O. Box N	OT acceptable		-		
	Tallahasse	e, FL 32301			<u>.</u>		
The street addr as changed wil	ess of its register I be identical.	red office and the stre	et address of the busin	ness office of i	ts register	red age	ent,
Such change wanthorized by t	as authorized by the board, or the	resolution duly adopt corporation has been t	ted by its board of din notified in writing of	ectors or by an the change.	officer so)	
S/Inchard of	Bergman ure of an officer or dire	NTO.	Leonard A	. Bergma		dent	/ CEO
l hereby accept further agree performance of geent. Or, if the	t the appointmen to comply with t f my duties, and its documen is h	t as registered agent of he provisions of all st I am familiar with and eing filed merely to re ation has been notified	and agree to act in the atutes relative to the p I accept the obligation effect a change in the	is capacity. proper and cor n of my positio registered offi	mplete n as revis	stored s, l	
			09/14/2018				
	gnature of Registered /	-		Date			_
	chalf of an entity	_					
	nell - Assist Typed or Printed Name	ant Secretary					
		* * * FILING F	FEE: \$35.00 * * *				