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To:

Division of Corporations

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From:

Account Name

: REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

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LLC REGISTERED AGENT CHANGE **BUYERS & SELLERS COMPLETE REALTY, LLC**

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OCH616 2020

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.

	me of the limited liability company: BUYERS						
(a)	2003 NORTH 9TH AVE	(_{b)} 2003 N	ORTH 9TH	I AVE		
· (••)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)			failing address of I (Note: MAY BE	limited liabi	-	
	PENSACOLA, FL 32503	<u>-</u>	PENSA	COLA, FL	32503		
	03/06/01		L010000	003588			
	Date of filing/registration in Florida	4.		Document nuir	ıber		
()	CHARLES S LIBERIS						
(a)	Registered Agent and Registered Office shown on the recor	•.					
	212 W Intendencia St						
	Registered Office Address (MUST BE FLORIDA STR.	EET ADDRES	<u>S)</u>				
(b)	PENSACOLA	3250	2				
(b)	Registered Agents Inc.						
(b)	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered Agent Age	stered Office a	ddress:				
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	stered Office a	ddress				
(b)	Enter name of NEW Registered Agent and/or NEW Regis	itered Office a	ddress:			€r∗.	
(b)	The Property of New Registered Agent and/or New Registered Agent and	stered Office a			ALTA	1.30 OXIF	
the li	7901 4th St N NEW Registered Agent and/or NEW Regis 7801 750 750 750 750 750 750 750 750 750 750	FL 3370 ne laws of the reged liability opers of the lift the limited	2 e State of Flo istered office company, it is mited liability	; and the busine s hereby confire y company or a:	ess office of ned that the	ned that of the re he chan	egister ge(s)

provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Bill Havre - Assistant Secretary

Signature of Registered Agent