150007827

(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:				

Office Use Only



900224048689

D. BRUCE MAR 2 3 2012 **EXAMINER**



CORPORATION SERVICE COMPANY

ACCOUNT	NO.	:	I2000000195
---------	-----	---	-------------

REFERENCE: 135427

AUTHORIZATION

COST LIMIT

ORDER DATE: March 19, 2012

ORDER TIME : 10:37 AM

ORDER NO. : 135427-008

CUSTOMER NO: 7875287

CHANGE OF AGENT

NAME: BIP, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce -- EXT# 2919

EXAMINER:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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: BIP, LLC 2. (a) Principal office address of limited liability company: 4210 West Tampa Bay Boulevard Tampa FL 33614 (Note: MUST BE STREET ADDRESS) Post Office Box 172117 (b) Mailing address of limited liability company: Tampa FL 33672 (Note: MAY BE POST OFFICE BOX) 08/09/2005 L05000078278 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Charles Beale Registered Agent: 4210 West Tampa Bay Boulevard Registered Office Address: Tampa FL 33614 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company **NEW** Registered Agent: 1201 Hays Street **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Tallahassee FL 32301 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Maureen Cathell, Authorized Person (Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the 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 608, 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.

(Signature of Registered Agent) Sylvia Queppet, Asst. VP

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: \$25.00**