10/16/19, 10:32 AM To: +1 850-617-6391 From: +1 727-461-1818 Bridge Real Estate (Croup LIC EL Change riorida Wepartment-of State

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(((H19000306872 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JOHNSON, POPE, BOKOR, RUPPEL & BURNS, LLP.

Account Number : 076666002140 : (727)461-1818 Fax Number : (727)441-8617

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Email Address:

LLC REGISTERED AGENT CHANGE BRIDGE REAL ESTATE GROUP, LLC

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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	BRIDGE REAL ESTATE G	ROUP, LLC		
3020	Na.	me of Limited L	iability Company	
Dear S	ir or Madam:			
The en	iclosed Registered Agent/Registered Of	fice Change and	fee(s) are submitted for fil	ing.
Please	return all correspondence concerning the	his matter to the	following:	
WILL	IAM T. CONROY, VICE PRESID	ENT		
	Name of Person			
CHE	STNUT BUSINESS SERVICES,	LLC		
	Firm/Company			
333 3	BRD AVENUE N, STE 200			
-	Address			
ST. F	ETERSBURG, FL 33701			
	City/State and Zip Code			
WillC	@jpfirm.com			
E	-mail address: (to be used for future an	nual report notif	ication)	
For fu	ther information concerning this matter	, please call:		
Erica	Hall	727 at (800-5980	
	Name of Person	ar (Area Code & Daytime T	elephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.(atLING ADDRESS: gistration Section vision of Corporations D. Box 6327 Hahassee, Florida 32314	
	Enclosed is a check for the following	g amount:		
	□ \$25 Filing Fee	□ \$5	55 Filing Fcc & Certified C	ору
INHSU	B (2/14)			
				(((H19000306872 3)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compasubmits the following statement in order to change its registered office or registered agent, or both, in the State Florida.

1. Na	me of the limited liability company: BRIDGE F	REAL ESTA		
2. (a)	7284 W PALMETTO PARK ROAD Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) SUITE 201) 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 1004
	BOCA RATON, FL 33433		-	ATON, FL 33433
	09/14/2005		L050000	90498
3. 5. (a)	Date of filing/registration in Florida COGENCY GLOBAL INC. Registered Agent and Registered Office shown on the record	4. Is of the Florida	Dept. of State	Document number
	115 NORTH CALHOUN STREET Registered Office Address (MUST BE FLORIDA STRE SUITE 4	ET ADDRESS	<u> </u>	
	TALLAHASSEE	, _{FL} 32301		20191
(b)	CHESTNUT BUSINESS SERVICES, LLC Enter name of NEW Registered Agent and/or NEW Register 333 3RD AVENUE NEW Registered Office Address: STE 200	cred Office ack	Iresx:	10:14 S1130
ica i		FI. 33701		Managara and a second and a second
the char agent w was/we the artic	mited liability company is not organized under the nge or changes are made, the Florida street address ill be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the member cles of organization or the operating agreement of the operating agreement of the operating agreement of the operation of a member of authorized representative of a member.	s of the regis d liability co ers of the limited li	tered office mpany, it is ited liability	and the business office of the registere hereby confirmed that the change(s) company or as otherwise provided in pany.
I hereb provisič the obli to mere notified	y accept the appointment as registered agent and ons of all statutes relative to the proper and comply actions of my position as registered agent as proving reflect a change in the registered office address in writing of this change. Division of Corporations P.C.	lete performa ided for in C s, I hereby co	ince of my a hapter 605, nfirm that t	luties, and I am familiar with and acce, F.S. Or, if this document is being filed he limited liability company has been