## L07000008928

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(==	,	·· <del>·</del>		
	cument Number)			
(50	edinent (valiber)			
Carried Carlos	C. A. E			
Certified Copies Certificates of Status				
<b></b>				
Special Instructions to	Filing Officer:			

Office Use Only



700394333167

09/15/22--01016--010 \*\*25.00

2022 SEP 15 PH 1: 49

S. SKAT.

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJI	HILLSBOROUGH TITLE, LLC					
Name of Limited Liability Company						
Dear S	iir or Madam:					
The en	nclosed Registered Agent/Registered Office C	Change and f	fee(s) are submitted for filing.			
Please	return all correspondence concerning this ma	itter to the f	ollowing:			
Wayne	e Harreli					
	Name of Person		_			
BPM S	SOLUTIONS, LLC					
	Firm/Company		_			
1605 S	S ALEXANDER ST, SUITE #102		_			
	Address					
PLAN	NT CITY, FL 33563					
	City/State and Zip Code	_	<del>-</del>			
	es@bpm-sol.com					
E	E-mail address: (to be used for future annual i	eport notific	cation)			
For fu	rther information concerning this matter, plea	ise call:				
Micha	el LaRosa	813 .t (	382-3880			
	Name of Person		Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following amount	ount:				
	■ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy			

## 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.

1. Na	ame of the limited liability company:	GH TITLE	LLC			
2. (a)	350 EAST BLOOMINGDALE AVENUE	(H	(b) 1605 SOUTH ALEXANDER ST			
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(~	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)			
	BRANDON, FL 33511		SUITE 102			
			PLANT CI	TY, FL 33563		
	01/24/2007		L070000089	28		
3.	Date of filing/registration in Florida	4.		Document number		· · ·
5. (a)	Holloway Law, P.A.					
J. (u)	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State	• ::	÷ .	12
	4114 W. San Juan Street					22 9
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			•		2022 SEP 15
					ı·•	5
	Tampa	33629			•	PH
	, , ,	"L		•	رے۔ ' ۔۔.	<del></del>
(b)	BPM SOLUTIONS, LLC					64
(-)	Enter name of NEW Registered Agent and/or NEW Register	ed Office ad	dress:		·	
	1605 S ALEXANDER ST	_		_		
	NEW Registered Office Address:					
	SUITE #102			_		
	PLANT CITY, I	FL_33563		_		
change agent was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the street of the control of the case of the c	he registere liability co s of the lim he limited l	ed office and ompany, it is nited liability liability com	d the business office of the business office of the business o	of the reg at the cha wise pro	istered ange(s)
4		Mic ——	hael LaRosa,	as COO of Managing N  Printed or typed name of		
	ature of a member or authorized representative of a member		in this same		•	'n miels else
I here provis the ob to mer notifie	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid effects a change in the registered office address, if in various of this change.	gree to act te perform ded for in ( I hereby c	in this cape ance of my e Chapter 605 onfirm that i	icity, I jurther agree luties, and I am Jamil , F.S. Or, if this docu the limited liability co	io compliar with i ment is b mpany h	y with the and accept being filed as been
Signati	Grand Agent as CFO of R	<sup>2</sup> A.				

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