(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:						
SONE						
J. HORNE JUL 16 2024						

Office Use Only



700431827767

RECEIVED

2024 JUL 15 PH 3: 14

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 529168 7560577

AUTHORIZATION :

COST LIMIT : \$ 25.00 Person Della Person

ORDER DATE : July 1, 2024

ORDER TIME : 8:58 AM

ORDER NO. : 529168-060

CUSTOMER NO: 7560577

CHANGE OF AGENT

NAME: BAINBRIDGE MID-ATLANTIC

CONSTRUCTION, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER:

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	une of the limited liability company: BAINBRIDGE MI	D-AT	LAI	NTIC CONS	STRUCTION, LLC	
2.	(a)	12765 W. Forest Hill Blvd.		(b) 12765 W. Forest Hill Blvd.			
<u>ٺ</u> .	(aj	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Suite 1307			Suite 1307 Wellington, FL 33414		
		Wellington, FL 33414	_				
		03/11/2008		L	.080000254	417	
3.		Date of filing/registration in Florida	4.	_	1	Document number	
5.	(a)	BCRA,LLC					
··	(11)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: LYNN FINANCIAL CENTER Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		1905 NW CORPORATE BLVD, SUITE 310	NW CORPORATE BLVD, SUITE 310				
		Boca Raton FL_	3343	1		2024 J.	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office	add	ress:		
						<u>.</u>	
		Corporation Service Company					
		NEW Registered Office Address:				تن'	
		1201 Hays Street					
		Tallahassee FL_	3230	1			
cha age wa:	inge ent v s/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	regist bility f`the	terec Cor limi	d office and npany, it is ted liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
	/s/ Chris Phillips			Chris Phillips, Authorized Representative			
Signature of a member or authorized representative of a member						Printed or typed name of signee	
pro the to t	visi obl nero	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I h I in writing of this change.	e to o perfor for i ereby	act i rma n Ci z coi	in this capa nce of my d hapter 605, nfirm that t	city. I further agree to comply with the haies, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	

Signature of Registered Agent

Elizabeth A. Dawson, Asst. Vice President on behalf of Corporation Service Company

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