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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 529168 7560577

COST LIMIT : \$ 25.00

AUTHORIZATION :

ORDER DATE : July 1, 2024

ORDER TIME : 9:50 AM

ORDER NO. : 529168-101

CUSTOMER NO: 7560577

CHANGE OF AGENT

NAME: RAS MANAGER, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER:

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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.

2.	(a)	12765 W. Forest Hill Blvd.		(b)	12765 W.	Forest Hill Blvd.
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(=,		dailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 1307			Suite 1307	7
		Wellington, FL 33414			Wellington	n, FL 33414
		04/08/2008		Į	_08000035	336
3.		Date of filing/registration in Florida	4.	-		Document number
5	(a)	BCRA,LLC				
υ.	(α)	Registered Agent and Registered Office shown on the record 1905 N.W. CORPORATE BLVD.	ls of the Flor	ida	Dept. of State	SECRENCE VE
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		LYNN FINANCIAL CENTER, SUITE 310				
		Boca Raton	, FL_3343	1		MI 0: 13
	(b)					
		Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	Corporation Service Company NEW Registered Office Address:					
						•
1201 Hays Street						
		Tallahassee	. FL			
ehage wa the	ange ent w s/we artic	mited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of aris Phillips	the registed liability ers of the limited	erec cor imi d li	d office and npany, it is ted liability ability com	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		ure of a member or authorized representative of a member	_			Printed or typed name of signee
pro the to	ovisie obli mere	ov accept the appointment as registered agent and cons of all statutes relative to the proper and completed agent as proving to the proper and completed agent as proving reflect a change in the registered office address in writing of this change.	agree to a ele perfor ided for in . I hereby	et i mai (Ci con	n this capa nce of my d hapter 605, nfirm that to	city. I further agree to comply with the luties, 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