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(Requestor's Name)			
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PICK-UP WAIT MAIL			
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COVER LETTER

Division of Corporations		
BG Cape, LLC SUBJECT:		
	Name of Limited L	iability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Register	ed Office Change and	fee(s) are submitted for filing.
Please return all correspondence concern	ning this matter to the	following:
Robert D. Knight, Jr.		
Name of Person	1	<u> </u>
BG Cape, LLC		
Firm/Company		
1508 SW 58th Street		
Address		_
Cape Coral, FL 33914		
City/State and Zip (Code	
Bob.Knight@paulhomes.com		
E-mail address: (to be used for futu	ire annual report notifi	cation)
For further information concerning this r	natter, please call:	
Robert Knight	239 at (872-3088
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 follo	owing amount:	
■ \$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.

l. N	lame of the limited liability company: BG Cape, LLC		
2. (a)			
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1508 SW 58th Street		(GK)
	Cape Coral, FL 33914		TX
	08/27/2009	" L0	99000082908
3.	Date of filing/registration in Florida	4.	Document number
5. (a)		
•	Registered Agent and Registered Office shown on the records of	of the Florida De	ept. of State:
	George H. Knott, Esq.		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	22
	1625 Hendry Street, 3rd Floor		
	Fort Myers	L 33901	:
	, 1	· L	
(b)			
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office addre	255:
	Robert D. Knight, Jr.		స్త
	NEW Registered Office Address:		
	1508 SW 58th Street		
	Cape Coral	33914 FL	
change agent was/w the art	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the State registered of the limited of the limited liab	office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in bility company. D. Knight, Jr., Manager
_	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	gree to act in e performanc ed for in Cha hereby confi	this capacity. I further agree to comply with the ee of my duties, and I am familiar with and accept opter 605, F.S. Or, if this document is being filed irm that the limited liability company has been
Signati	ire of Registered Agent		

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