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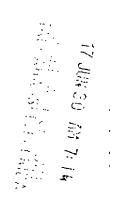
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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06/30/17--01010--028 **45.00



COVER LETTER

_	istration Section ision of Corporations	•				
SUBJECT:	Robert Bardsley, LLC					
JOBSECT.	Name of Limited Liability Company					
Dear Sir or I	Madam:					
The enclose	d Registered Agent/Registered Off	īce Change and fe	e(s) are submitted for filing.			
Please return	n all correspondence concerning th	is matter to the fol	llowing:			
Robert Ba	ırdsley					
	Name of Person					
Robert Ba	irdsley, LLC					
	Firm/Company					
2170 NW	10th Place					
	Address					
Delray Be	ach, FL 33445					
	City/State and Zip Code					
rjbards@h	notmail.com					
E-mail	address: (to be used for future and	ual report notifica	tion)			
For further i	nformation concerning this matter.	please call:				
Robert Ba	rdsley	561	542-4402			
	Name of Person		Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Regis Divis P.O. I	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enc	losed is a check for the following	amount:				
☑ \$25 Filing Fee						

INHS18 (2/14)

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.

Na	me of the limited liability company: Robert Bardsle	ey, LLC			
(a)	2170 NW 10th PI		(b) 2170 NW 10th PI		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Delray Beach, FL 33445	_	Delray &	Beach, FL 33445	
	06/14/2011		L110000	69311	
	Date of filing/registration in Florida	4.		Document number	
(a)	United States Corporation Agents, Inc.				
(50)	Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of Stat	e:	
	13302 Winding Oak Court				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	_	
	Suite A				
	Tampa , FI.	33612		7 Ju	
(b)	Robert Bardsley (new agent and address)			17 JUN 30	
,	Enter name of NEW Registered Agent and/or NEW Registered (Office ado	lress:	-	
	Robert Bardsley			7	
	NEW Registered Office Address:			- y.	
	2170 NW 10th Place			_	
	Delray Beach .FL	33445		_	
cha nt w s/we arti- ignat ereb visio obli	mited liability company is not organized under the law nge or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of a member or authorized representative of a member on accept the appointment as registered agent and agreems of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address. I he	the regis bility co the lim imited I: Rot ee to act performa- for in C	tered office mpany, it i ited liabilit iability con pert Bards in this cap ince of my hapter 603	e and the business office of the registers hereby confirmed that the change(s) y company or as otherwise provided in apany. Sley Printed or typed name of signee Printed or typed name of signee	

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