

L11000120684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

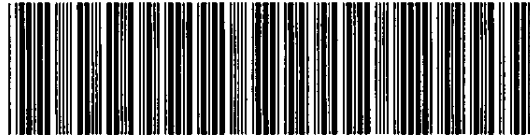
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 30 2015
S. YOUNG

INFINITY
Professional Services Group Inc.

Cathi Wall

217.469.5225 - Direct Dial
855.450.7774 - Facsimile
cathi.wall@InfinityPSGI.com

November 20, 2015

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: ~~BAS Investment Holdings, LLC~~

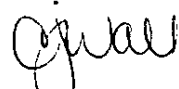
Dear Sir or Madam:

Enclosed for filing is the Change of Registered Agent/Office for the above-referenced entity and check in the amount of \$25.00.

Please file at your earliest opportunity and return the file-stamped copy to me at the below address.

If you have any questions or need anything else to process this filing, please do not hesitate to contact me at the above number.

Sincerely,



Cathi Wall

Enclosures

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAS Investment Holdings, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

C. Wall

Name of Person

Infinity Professional Services Group Inc.

Firm/Company

600 S. Second St., Suite 104

Address

Springfield, IL 62704

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

C. Wall

at (217)

645-6457

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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TALLAHASSEE, FLORIDA

**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. Name of the limited liability company: BAS Investment Holdings, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

406 West Hillsboro Blvd
Deerfield Beach, FL 33441

406 West Hillsboro Blvd
Deerfield Beach, FL 33441

10/21/2011

L11000120684

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

NRAI Services, Inc.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1200 South Pine Island Road

Plantation, FL 33324

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Registered Agent Solutions, Inc.

NEW Registered Office Address:

155 Office Plaza Drive, Suite A

Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Benedict Silverman, Manager

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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