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OCT 1 0 7021 LALBRITTON Registration Section Division of Corporations

TO:

INHS18 (2/14)

SUBJECT: Band	ock LLC	
Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offic	ee Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Joanne Lysa	Je.	
Name of Person		
Firm/Company		
	· A	
1291 V/100 Har # 0	(2)	
Address		
riami Reach &	2 33139	
City/State and Zip Code		
E-mail address: (to be used for future annu	hetmail-com	
E-mail address: (to be used for future annu	nal report notification) $441331287$	
For further information concerning this matter, p	please call:	
JLysade	at (AAI) 293 8876  Area Code & Daytime Telephone Number	
Name of Person	Area Code & Daytime Telephone Number	
Mailing Address:	Street Address:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	
Enclosed is a check for the following a	imount:	
D \$25 Filing Fee	S55 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.

or hoth, in the state of the st	the State of Fioriaa.
1. Name of the limited liability company: Baylack LLC	
2. (a) Joanne Lysack (b) Joanne Lysach Principal office address of limited liability company  Note: MINT BE STREET ADDRESS)  Mailing address of limited Involves May BE POST of State  (Note: MAY BE POST of State)  (A) Lidocook of State)  (B) Joanne Lysach  (Note: MAY BE POST of State)	ighility company:  DEFICE BOX  A # 9 4  LUM 33139
Registered Office Address GMUST BE FLORIDA STREET ADDRESSI 1756 No. 1 100 Paly Show BC FL 29 K	
(b) <u>Scatt</u> klain	20
Enter name of NEW Registered Agent and/or NEW Registered Office address:  1766  NEW Registered Office Address:  1767  NEW Registered Office Address:  1768  NEW Registered Office Addres	2021 SEP 30 AH 11: 01
hange or changes are made, the Florida street address of the registered office and the business office of gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that	ned that after the the registered

orida 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 Printed or typed name of signee

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 notified in ferting of this change.

Signature of Registered Agent