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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

. ACCOUNT	NO. : I2000000195					
REFER	ENCE : 529168) 7560577					
AUTHORIZA	TION Frelokens					
COST L	IMIT : \$ 25.00					
ORDER DATE : July 1, 202	4					
ORDER TIME : 10:37 AM						
ORDER NO. : 529168-024						
CUSTOMER NO: 7560577						
CHANGE OF AGENT						
NAME: BAINBRID ASSOCIAT	GE CC URBANA ES CAPITAL, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
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CONTACT PERSON: Amanda M						
	EXAMINER:					

## 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. Na	ame of the limited liability company:  BAINBRIDGE (	CC URBA	NA ASSOC	IATES CAPITAL, LLC
2. (a)	12765 W. Forest Hill Blvd.	(b	12765 W.	Forest Hill Blvd.
<b>-</b> . (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 1307		Suite 1307 Wellington, FL 33414	
	Wellington, FL 33414	_		
	03/27/2013		L13000045	696
3.	Date of filing/registration in Florida	<del>-</del> 4.		Document number
5. (a)	BCRA, LLC			
J. (a)	Registered Agent and Registered Office shown on the records of	FIL. 15		
	Lynn Financial Center			E m
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1905 NW Corporate Blvd, Suite 310			171
	Boca Raton . F	33431		5. <b>5.</b> 5.
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company		dress:	
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee	32301		
change agent v was/we the arti	imited 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 liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the hris Phillips	e registere ability co- of the lim climited li	d office and mpany, it is ited liability ability com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	ture of a member or authorized representative of a member		·	Printed or typed name of signee
provisi the obl to mere notified . Or	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address. It is miriting of this change.	rve to act performa d for in C hereby co	in this capa nce of my d hapter 605, nfirm that ti	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Signatu	re of Registered Agent			

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

Elizabeth A. Dawson, Asst. Vice President on behalf of Corporation Service Company