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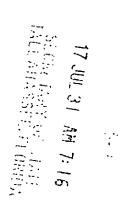
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Bayor Sevice	25 LLC ed 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:
Bruce Miller Name of Person	
Bayneo Services Firm/Company	
708 LIMIA PINCIVE	St RCY.
Byandon FL 33511 City/State and Zip Code	
Bamco Fence & Smail C E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please cal	i:
BYILCE WILLET at (§	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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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.

1. N	ame of the limited liability company: <u>Eury)(</u>	Services
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) 708 Lithia Tyce Yest Pa Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	<u>Ste: 101</u>	5 TE WIL
	Brandon, FL 33511	Brandon FL 33511
	5/8/2014	L14000074913
3.	Date of filing/registration in Florida	4. Document number
5. (a)	Bruce miller	
,	Registered Agent and Registered Office shown on the records of the	lorida Dept. of State:
	708 Lithia Pinecres	\mathcal{F}_{α}
	Registered Office Address (MUST BE FLORIDA STREET ADI	ADECC)
	STE IUI	
	Brandun .FL.?	35\\ 35\\
	Kanton Marier	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Off	ite address
		600
	NEW Registered Office Address:	
	FL	
the cha agent v was/we the arti	imited liability company is not organized under the laws or unge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabilete authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the limit of a member or authorized representative of a member.	riegistered office and the business office of the registered ity company, it is hereby confirmed that the change(s) is limited liability company or as otherwise provided in
provisi the obl to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete per igations of my position as registered agent as provided factories of the change in the registered office address. I here I in writing of this change.	to act in this capacity. I further agree to comply with the formance of my duties, and I am familiar with and accept in Chapter 605, F.S. Or, if this document is being filed early confirm that the limited liability company has been
	te of Registered Agent	