Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

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Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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Email Address:

LLC REGISTERED AGENT CHANGE BIRDDOG PROPERTY HOLDINGS, LLC

Certificate of Status	0
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Page Count	02
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M. SOLOMON

OCT - 3 2024

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Fax: 8134365206

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	me of the limited	iability company: Birddog Property Ho	oldings,	LLC	:					
2.	(a)			(b	b)						
	•	'	re address of limited liability company: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)							
		7901 4th St N ST	E 300	7901 4th St N STE 300							
		St Petersburg, FL	33702	-	St	. Petersbu	rg, FL 33702				
		10/07/14			L14	00015453	8				
3.		Date of fi	ling/registration in Florida	4.		E	Document nui	nber			
5.	(a)	Immerfall, Matthew									
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:									
		50 FOREST STRE	ET			در: ۲۲: پـ	202				
		Registered Office Ad	dress <u>(MUST BE FLORIDA STREET AL</u>			2024 OCT - 35 5 7 7 7					
	(b)	Windermere	, FL ³			-3 PH III					
		Northwest Registere	lortnwest Registered Agent LLC					ਾਹ ਸਦੀ -			
	. ,	Enter name of NEW I	EW Registered Agent and/or NEW Registered Office address:					37 ATE			
		7901 4th St N									
		NEW Registered Offi	ice Address 								
		STE 300	1								
		St. Petersburg	, FL ³	3702							
the age was	cha int w s/we	nge or changes are fill be identical. O re authorized by a	ipany is not organized under the laws made, the Florida street address of the firmative vote of the members of or the operating agreement of the limited to the operating agreement of the limited to the	ic regi: ility co the lim	stero omp nited	ed office a any, it is l Hiability	and the busin- hereby confir company or a	ess offic med that	e of the t the ch	e registered lange(s)	
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I h pro the to n not	ereb visio obli nere jliga	ny accent the annoi	horized representative of a member	erform for in C reby ce	in i ance Chaj onfii	this capae	Printed or typed vity. I further tties, and I ar F.S. Or, if th we limited liah	aeree h	a comn	ly with the and accept being filed as been	
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Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00