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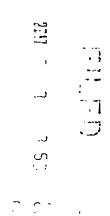
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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

151

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscglobal.com

Date: November 14, 2017

Order#: 909874/015

Re: B&S SOFLA VENTURES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

__ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Tecora Bell c/o Corporation Service Company 251 Little Falls Drive

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.

2. (a) 10	02 E. Newport Center Dr. Ste 200 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company:
	Principal office address of limited liability company:	<u> </u>	•
_	•	· · · · · · · · · · · · · · · · · · ·	(Note: MAY BE POST OFFICE BOX)
	Deerfield Beach, FL 33442		
	02/19/2015	L1500	0036797
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	COHEN, SETH		
Reg	gistered Agent and Registered Office shown on the records of		State:
Ke	gistered Office Address (MUST BE FLORIDA STREET)	<u>(DDRESS)</u>	•
	1201 Hays Street		
T	allahasse , FL	32301	
Ent	orporation Service Company or name of NEW Registered Agent and/or NEW Registered 201 Hays Street	Office address:	
<u>NE</u>	EW Registered Office Address:		
Ta	allahassee . FL	32301	,
	, 1 -		- -
the change agent will was/were a	ted liability company is not organized under the law e or changes are made, the Florida street address of be identical. Or, in the case of a Florida limited lia authorized by an affirmative vote of the members of a of organization or the operating agreement of the	the registered of ability company, if the limited liab limited liability of	fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.
Signature	of a member or asthefized representative of a member		Printed or typed name of signee
I hereby a provisions the obligat to merely r	accept the appointment as registered agent and agree of all statutes relative to the proper and complete tions of my position as registered agent as provide reflect a change in the registered office address, I writing of this change. Registered Agent Corporation Service Company	d for in Chapter (hereby confirm th	uthorized Person appacity. I further agree to comply with the