L15000074999

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

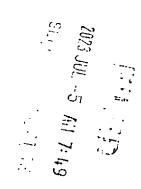
Office Use Only



200411673452

S. CHATHAM AUG 13 2023

07/05/23--01017--017 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations		•		
SUBJE	B & L Henry LLC				
	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered (Office Change and	fee(s) are submitted for filing.		
Picase	return all correspondence concerning	this matter to the f	'ollowing:		
Lisa He	enry				
	Name of Person				
B & L	Henry LLC				
	Firm/Company				
425 Co	unty Road 41				
	Address		-		
Prattvil	łe, AL 36067				
	City/State and Zip Cod	c			
lisamh	enry60@gmail.com				
E	-mail address: (to be used for future	annual report notif	ication)		
For fur	ther information concerning this mat	ter, please call:			
Lisa H	enry	850 at (830-7730.		
	Name of Person		Area Code & Daytime Telephone Number		
	Mailing Address:		Street Address:		
	Registration Section		Registration Section		
	Division of Corporations		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 follow	ing amount:			
	■ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy		

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: B & L Henry LLC			
2. (a)	4708 Canary Way	(b) 470	98 Canary Way	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Crestview, FL 32539	Cre	stview, FL 32539	
	04/28/2015		00074999	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Robert M. Henry		of State:	
5. (a)	Registered Agent and Registered Office shown on the records of t	he Florida Dept	of State:	
	Registered Office Address (MUST BE FLORIDA STREET A	MH 7:49		
	Crestview	32539		
	Enter name of NEW Registered Agent and/or NEW Registered Registered Agent, Inc.	:		
	NEW Registered Office Address:	· · · · · · · · · · · · · · · · · · ·		
	7901 4th St. N. STE 300			
	St. Petersburg , FL	33702		
chang agent was/w the an	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registered of ability compa of the limited limited liabil	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.	
	ature of a member or authorized representative of a member	Lisa M. I	Henry MGR Printed or typed name of signee	
I here provis the oh to med notifie	ature of a member of authorized representative of a member of authorized representative of a member and agressions of all statutes relative to the proper and complete pligations of my position as registered agent as provided rely reflect a change in the registered office address, I had been of this change.	ee to act in the performance of for in Chap wereby confirmation.	his canacity. I further agree to comply with the	
	ure of Registered Agent			