Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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	REGISTERED AGENTS INC.	٠-,
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Phone :	(307)200-2803	
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		27
ter the email address for	this business entity to be u	sed for@futur
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LLC REGISTERED AGENT CHANGE BURGESS CAPITAL LLC

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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.

l, Na	ame of the limited liability company: BURGI	ESS CAPITA	L LLC		
	352 Ramsey Rd	_(b) 352 Ra	(b) 352 Ramsey Rd		
(~)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Yardley, PA 19067	Yardle	y, PA 19067		
	07/08/2015	L15000	114650		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	AGENTS AND CORPORATIONS, INC.				
). (a)	Registered Agent and Registered Office shown on the record	ls of the Florida Dept. of Sta	 te:		
	300 5TH AVE S STE 101-330				
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	_		
	NAPLES	, _{FL} 34012			
(b)	Registered Agents Inc.		0EC 三三三二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二二		
	Enter name of NEW Registered Agent and/or NEW Regist	tered Office address:			
	3030 N. Rocky Point Dr.				
	NEW Registered Office Address:		三三 マ		
	STE 150A		32		
	Tampa	, FL_33607			
the cha agent v	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membicles of organization or the operating agreement of	he laws of the State of F ss of the registered officed liability company, it ers of the limited liabil	is hereby confirmed that the change(s) ity company or as otherwise provided in		
Sions	sture of a member or authorized representative of a member	Riley Faik	Printed or typed name of signee		
I here provis the ob to mer notitie	thy accept the appointment as registered agent and compoints of all statutes relative to the proper and complications of my position as registered agent as provedy reflect a change in the registered office address of this change. Bill Havre - Assis	d agree to act in this ca pleie performance of my ovided for in Chapter 60 ss, I hereby confirm tha stant Secretary	pacity. I further agree to comply with the duties, and I am familiar with and accepts. Or, if this document is being filed the limited liability company has been		
Signat	ure of Registered Agent				