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



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COVER LETTER

Divi	sion of Corporations				
0 1 1 1 1 1 1 1 0 0 0 0 0 0 0 0 0 0 0 0	BRIDGE MECHANICAL, LLC				
SUBJECT:	Name of Limited Liability Company				
Dear Sir or N	⁄adam:				
The enclosed	l Registered Agent/Registere	ed Office Change a	und fee(s) are submitted for filing.		
Please return	all correspondence concern	ing this matter to t	he following:		
Albert Holder					
	Name of Person				
Straticon LLC					
	Firm/Company				
1515 S Federa	al Hwy Unit 401				
	Address				
Boca Raton, I	FL 33432				
	City/State and Zip C	ode			
vendor.invoic	es@straticon.com				
E-mail	address: (to be used for futu	re annual report no	otification)		
For further in	nformation concerning this n	natter, please call:			
Albert Holder		772 at (210-0200		
	Name of Person		Area Code & Daytime Telephone Number		
Reg Divi P.O	ling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enc	losed is a check for the follo	owing amount:			
■ \$:	25 Filing Fee		\$55 Filing Fee & Certified Copy		

TO: Registration Section

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. 1	Jame of the limited liability company: BRIDGE MECH	IANICAL, LLC	,
2. (a)	1515 S Federal Hwy Unit 401, Boca Raton, FL 33432	(b) 1515 S Fed	deral Hwy Unit 401, Boca Raton, FL 33432
. (.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1515 S Federal Hwy Unit 401, Boca Raton, FL 33432	1515 S Fee	deral Hwy Unit 401, Boca Raton, FL 33432
	02/19/2018	L180000443	328
3.	Date of filing/registration in Florida	4.	Document number
5. (a	Albert Holder		
. (0	Registered Agent and Registered Office shown on the records o	f the Florida Dept. of State	:: ::
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	-
	1515 S Federal Hwy Unit 401		7. 2
	Boca Raton, F	L_33432	924 JU 1500 J
(b)			2024 JUN -3 SEC: 11 1
	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	· · · · · · · · · · · · · · · · · · ·
	JC7, LLC		PH 2:0
	NEW Registered Office Address:		
	1515 S Federal Hwy Unit 401		-
	Boca Raton, F	L	-
chang agent was/v the ar	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization of the operating agreement of the lature of a member or authorized representative of a member which accept the appointment as registered agent and agains of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address. I seed in writing of this change.	e registered office and ability company, it is of the limited liability company. It is the limited liability company.	the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany. How is How war to comply with the

Signature of Registered Agent