## 

(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



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 529168 7560577							
AUTHORIZATION: Soul Reman							
COST LIMIT : \$ 25.00							
ORDER DATE : July 1, 2024							
ORDER TIME : 10:32 AM							
ORDER NO. : 529168-017							
CUSTOMER NO: 7560577							
CHANGE OF AGENT							
NAME: BAINBRIDGE CAMPUS CONSTRUCTION, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX. PLAIN STAMPED COPY							
CONTACT PERSON: Amanda Miller EXT#							

## 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	Jame of the limited liability company: BAINBRIDGE	CAMPU	s (	CONSTRUCT	TION, LLC		
2. (a)	12765 W. Forest Hill Blvd.		(b)	12765 W. F	orest Hill Blvd.		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				iling address of limited liability company:  Note: MAY BE POST OFFICE BOX		
	Suite 1307			Suite 1307			
	Wellington, FL 33414			Wellington, I	FL 33414		
	03/08/2018		Ĺ	.1800006157	72		
3.	Date of filing/registration in Florida	4.	_	Do	ocument number		
5. (a	BCRA, LLC						
J. (u	Registered Agent and Registered Office shown on the records of the Florida Dept. of State						
	1905 N.W. Corporate Blvd.				<u> 2</u> 2		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	Lynn Financial Center, Suite 310				F IL. <b>24 JUL 15</b>		
	Boca Raton I	33431			15 AH		
(1.)					<u> </u>		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			ress:			
	Corporation Service Company						
	NEW Registered Office Address:						
	1201 Hays Street						
	Tallahassee, i	L_32301	32301 L				
chang agent was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited there authorized by an affirmative vote of the members itcles of organization or the operating agreement of the	ne registe liability c of the li	red on mit	l office and the pany, it is he dead liability of the contract	ne business office of the registered ereby confirmed that the change(s) ompany or as otherwise provided in		
			ıris		horized Representative		
Signature of a member or authorized representative of a member				Printed or typed name of signee			
provis the ob to mei	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet digations of my position as registered agent as provid ely reflect a change in the registered office address, a d in writing of this change.	e perforn	lai.	ice of my duti	ies, and I am familiar with and accept		

Signature of Registered Agent

Elizabeth A. Dawson, Asst. Vice President on behalf of Corporation Service Company