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COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	BV INVESTORS TAMPA LL	.C					
30 001		e of Limited Li	ability Company		-		
Dear Si	r or Madam:						
The en	closed Registered Agent/Registered Offi	ice Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning th	is matter to the	following:				
MNE	ELA TADI						
VINE		.	_				
	Name of Person						
	Firm/Company						
353 8	SCANNO DR			9.7 8.7	~		
	Address			<u>.</u> 2.	<u>=</u>		
OAK	PARK, CALIFORNIA -91377				ni eay 1103		
	City/State and Zip Code			·. ·.	יי יי	17	
VTAI	DI28@GMAIL.COM			<u>.</u>	ىب 0		
Ŧ	E-mail address: (to be used for future ann	nual report notif	fication)	ř)2		
For fu	rther information concerning this matter	, please call:					
VINE	ELA TADI	408 at (439-1427				
	Name of Person	at (Area Code & Daytime Tele	phone Numb	er er		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314				
	Enclosed is a check for the following	Enclosed is a check for the following amount:					
	☑ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy	y			
INHS1	8 (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.

Naı	ne of the limited liability company: BV INVESTOR	RS TAMPA LLC	
	6204 PADDOCK GLEN DR, UNIT#208	(b) 6204 P/	ADDOCK GLEN DR, UNIT#208
(4) -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
٠	TAMPA	TAMPA	
	FL - 33634	FL - 336	534
	03/28/2018	L180000	79555
	Date of filing/registration in Florida	4.	Document number
(a)	CHEYENNE MOSELEY,		
(a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta	te:
	UNITED STATES CORPORATION AGENT	SINC	
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)	_
	13302 WINDING OAK COURT #A		
	TAMPA .FL	33612	
	BHANUMATHI BAYATAPALLI		- 77
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
			. w —
	NEW Registered Office Address:		02
	6204 PADDOCK GLEN DR, UNIT#208		_
	TAMPA , FL	33634	
ie cha gent v as/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered office ability company, it of the limited liability	ce and the business office of the registere is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.
Signa	ture of a member or authorized representative of a member	VIIIEEE/CI/	Printed or typed name of signee
here rovisi ie obi mer otifie	by accept the appointment as registered agent and aging ons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of this change. The of Registered Agent	ree to act in this cap performance of my d for in Chapter 60 hereby confirm that	nacity. I further agree to comply with th

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00