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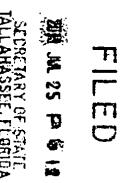
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: BC Strategist							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this	s matter to the following:						
Benna Cawthorn Cail							
Name of Person							
BC Strategist, LLC							
Firm/Company							
113 Granada Lane							
Address							
Ponte Vedra Beach, FL 32082							
City/State and Zip Code							
benna@bcstrategist.com							
E-mail address; (to be used for future annu	ial report notification)						
For further information concerning this matter, p	please call:						
Benna Cail	904 347-9092						
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS:	MAILING ADDRESS:						
Registration Section	Registration Section						
Division of Corporations	Division of Corporations						
Clifton Building 2661 Executive Center Circle	P.O. Box 6327						
Tallahassee, Florida 32301	Tallahassee, Florida 32314						
Enclosed is a check for the following amount:							
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy						

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.	Na	me of the limited liability company: BC Strategist			
2.	(a)	113 Granada Lane	(b) 113 Granada Lane		
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	· <i>-</i> — –	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Ponte Vedra Beach, FL 32082	_	Ponte Ve	edra Beach, FL 32082
		June 21, 2018		L1800015	53234
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	United States Corporation Agents, INC			
	,	Registered Agent and Registered Office shown on the records of the Cheyenne Moseley	ie Flori	da Dept. of State	::
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
		13302 Winding Oak Court A			
		Tampa ,FL	3361	2	-
,	(b)	(b) Benna Cail			SECR ALLA
	(-)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office a	iddress:	ETARY OF
		NEW Registered Office Address:			
		113 Granada Lane			MAJE ORIDA
		Ponte Vedra Beach FL	3208	2	
the age wa	cha ent v s/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of tivill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of eles of organization or the operating agreement of the l	the reg bility I the li imited	gistered office company, it is mited liability	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in
	igna	ture of a member or authorized representative of a member			Printed or typed name of signee
pro the to no	ovisi nero tifico	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h Lin writing of this change.	e to a perfor I for in ereby	ct in this cape mance of my o i Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been