

L18000247543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

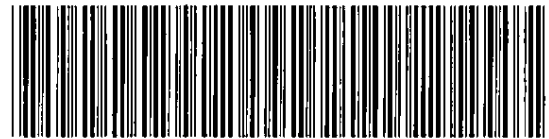
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2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Blue Pillar 5 LLC.
Name of Corporation

DOCUMENT NUMBER: L18000247543

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michelle Treiber
Name of Contact Person
Freebird Construction and Management LLC
Firm/Company
741 Oaks Field Road
Address
Jacksonville, FL 32211
City/State and Zip Code
FCM.Michelle@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Treiber at (904) 994-1107
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Blue Pillar 5 LLC
2. The principal office address: 9378 Arlington Expressway, #191
Jacksonville, FL 32225
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/22/2018 Document number: L18000247543
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Our Bookkeepers inc. (resigned)
13500 Beach Blvd. Ste 45
Jacksonville, FL 32224

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Michelle Treiber
9378 Arlington Expressway, #191
Jacksonville, FL 32225
P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Florian Sellen
Signature of an officer or director

Florian Sellen
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Michelle E. Treiber
Signature of Registered Agent

08/01/2023
Date

If signing on behalf of an entity:

Blue Pillar 5 LLC
Typed or Printed Name

*** FILING FEE: \$35.00 ***