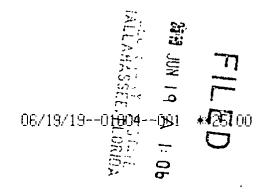
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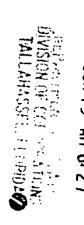
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D SCOTT

JUN 1 9 2019

COVER LETTER

Division of Corporations		
16610 BLUE HERON PCOI	_A, LLC	
	ne of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitt	ed for filing.
Please return all correspondence concerning th	is matter to the following:	
WILLIAM HAYES		50
Name of Person		
16610 BLUE HERON PCOLA, LLC		JUN 1
Firm/Company		
PO BOX 11096		M JUN 19 A 1: 06
Address		7. C
PENSACOLA, FL 32514		
City/State and Zip Code		
BILCOBUILDERSCO@GMAIL.COM		
E-mail address: (to be used for future ann	nal report notification)	
For further information concerning this matter,	please call;	
WILLIAM HAYES	850 377-5975	
Name of Person	Area Code & Da	sytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRES Registration Section Division of Corporati P.O. Box 6327 Tallahassee, Florida 3	ons
Enclosed is a check for the following	amount:	
☑ \$25 Filling Fee	☐ \$55 Filing Fee & Ce	rtified 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.

ì N	ame of the limited liability company: 16610 BLUE	E HERON PC	DLA, LLC
2. (a)	MARK PUNO	(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	811 NORTH SPRING STREET		
	PENSCOLA, FLORIDA 32501		
	10/31/2018	L180	00256204
3.	Date of filing/registration in Florida	4,	Document number : 😭
5. (a)			Document number
	MARK PUND A Lexander, Benja	of the Florida Dept. o	TILED ANASSELFLORINA
	Registered Office Address (MUST BE FLORIDA STREET	".ADDRESS)	
	811 NORTH SPRING STREET		
	PENSACOLA, F	_L 32501	
	WILLIAM HAYES NEW Registered Office Address:		
	PO BOX 11096		
	PENSACOLA	_32514	
ne cha: gent w vas/we	mited liability company is not organized under the la nge or changes are made, the Florida street address o fill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members of cless of briganization or the operating agreement of the	t the registered o lability company of the limited lia	ffice and the business office of the registered, it is hereby confirmed that the change(s) hility company or as otherwise provided in
<u>-</u>	ure of a member or authorized representative of a member	WILLIAM	
hereb rovisio he obli mere otified	oy accept the appointment as registered agent and agents of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address. I in writing of this change.	ree to act in this performance of d for in Chapter hereby confirm t	Printed or typed name of signce capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed has the limited liability company has been
	gations of inv position as registered agent as provide iv reflect d change in the registered office address, I in writing of this change.	ed for in Chapter hereby confirm t	605, F.S. Or, if this document is hat the limited liability company