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		(Re	questor's Nar	ne)	
		(Add	dress)		
		(Adı	dress)		
		(Cit	y/State/Zip/Ph	none #)	_
	PIC	K-UP	☐ WAIT		MAIL
	. 	(Bu	siness Entity	Name)	
		(Do	cument Numi	oer)	
ertifie	ed Copies	·	Certific	ates of S	Status
Spec	ial Instru	ctions to I	Filing Officer:	_	

Office Use Only



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A 1974MONS



2804 Gateway Oaks Drive #100 Sacramento, CA 95833 Phone (800)533-7272 Fax (800)603-5868 REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

Date: January 09, 2020

AE:

Kerra Childress

TO:

Florida Department of State

New Filing Section - Division of Corporations

H1080

REFERENCE:

1395128

PO Box 6327

Tallahassee, FL 32314

FAX:

PLEASE PERFORM THE FOLLOWING:

BLUE RHINO OF FLORIDA, LLC

Change of Registered Agent

IN: FL

SPECIAL INSTRUCTIONS: Please file routine and provide one plain copy.

Service Description	Check Number	Name	<u>Amount</u>
Change of Registered Agent	747616	Registration Section Division of Corporations	\$25

PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Kerra Childress TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #100 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)533-7272

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.

2. (a)		(t	o)				
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	240 LOOKOUT PL		240 LOOKOUT PL MAITLAND, FL 32751				
	MAITLAND, FL 32751						
	03/08/2019		L19000066	5654			
3.	Date of filing/registration in Florida	4.		Document nu	mber		
5. (a)							
	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of Sta	ate:	(<u>?</u>	20;	
	LEGALINC CORPORATE SERVICES INC.				CR FAL	2020 JAN 22	totage.
	Registered Office Address (MUST BE FLORIDA STREE)	T ADDRESS	2			A	ر رساد
	5237 SUMMERLIN COMMONSSUITE 400					22	
	FORT MYERS	L_33907			က် <u>(</u> က နှ	A	
					31.5 17.5 18.18	7:	٧
(b)			_	_		သ	
	Enter name of NEW Registered Agent and/or NEW Registers	d Office add	iress:				
	Paracorp Incorporated						
	NEW Registered Office Address:						
	155 Office Plaza Drive, 1st Floor			_			
	Tatlahassee , F	L ³²³⁰¹					
If the 1	imited liability company is not organized under the la	we of the	State of El	— orida litia basal	hy confirmed	that af	tor the
change	or changes are made, the Florida street address of the	e registere	d office an	d the business of	office of the r	egister	ed
	vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members						
	cles of organization or the operating agreement of the				is offici wise p	n o v ide	u 111
7	de Track	\mathcal{L}	W. m	KONAPE	LSKY		
Signa	rure of a member or authorized representative of a member	-/-	·	Printed or typed	name of signee		
I herei	by accept the appointment as registered agent and ag	ree to act i	n this cape	acity. I further	agree to com	ply wit	h the
provisi the obl	ons of all statistics relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I	perjorman d for in Ci	ice of five Tapter 605	auties, and i am i F.Ş. Or, if thi	is document is	n ana a s being	filed
to mere notified	lly reflect a change in the registered office address, I I in writing of this change.	hēreby coi	ifirm that i	the limited liabi	ility company	has be	en
)rd.	Mara Asst Secretary						
A601)	<i>こけついひ、11</i> 55+ シモじ <i>でガス</i> でン						