Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000114948 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

LLC REGISTERED AGENT CHANGE BFG REALTY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

MAR 2 8 2024

3/27/2024 12:57:52 PDT To 18506176383 Page: 2/2 Fax: 8134365206

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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Nai	me of the limited liability company:	.c	
(a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Marling address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	05/06/19	 L1900	00121977
	Date of filing/registration in Florida	4,	Document number
(a)	CINDY'S FLORIDA LLC		
	Registered Agent and Registered Office shown on the records of		
	8051 N TAMIAMI TRAIL		
	Registered Office Address	ADDRESS)	
	STE E6		
	SARASOTA FI.		
(h)	Northwest Registered Agent LLC Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	TALCHESSE FLORID
	7901 4th St N		22
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg, FI	33702	. <u></u>
char ent w s/wer artic	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of the organization of the operating agreement of the	f the registered ability compar of the limited I	I office and the business office of the registere ny, it is hereby confirmed that the change(s) jiability company or as otherwise provided in ity company.
ignate	are of a member or authorized representative of a member		Printed or typed name of signee
ovisia Obli mere	ey accept the appointment as registered agent and age ons 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 I'm writing of this change.	ree to act in the performance d for in Chapt hereby confirm	is capacity. I further agree to comply with th of my duties, and I am familiar with and accepter 605, F.S. Or, if this document is being file in that the limited liability company has been
1/	Faylor Newman - Assistant S	ecretary	

Signature of Registered Agent