L19000 257 059

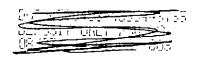


(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									

Office Use Only



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08/27/24--01339--003 **250.00

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COVER LETTER

TO:	Registration Section Division of Corporations									
SUBJE	B1 HOLDCO LLC T: Name of Limited Liability Company									
Dear Si	r or Madam:									
The end	closed Registered Agent/Registered Office	Change a	nd fee(s) are submitted for filing.							
Please r	return all correspondence concerning this r	natter to t	he following:							
Michael	l Branco									
	Name of Person									
	Firm/Company	· · ·								
9484 Bo	oggy Creek Road									
	Address									
Orlando	o. FL 32824									
	City/State and Zip Code									
mbbcor	porations@gmail.com									
E-	-mail address: (to be used for future annua	report no	otification)							
For furt	her information concerning this matter, ple	ease call:								
Michael	Name of Person	at (407-467-9800) Area Code & Daytime Telephone Number							
	Name of Ferson		rica code & Daytine relephone (valide)							
	Mailing Address:		Street Address:							
	Registration Section		Registration Section							
	Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee							
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810							
			Tallahassee, FL 32303							
	Enclosed is a check for the following an	nount:								
	■ \$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.

I. Na	ame of the limited liability company: B1 HOLDCO LL	.C						
2. (a)	9484 Boggy Creek Road		(b) 9484 Boggy Creek Road					
(_,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0,		Mailing address (Note: MAY		-	
	ORLANDO, FL 32824	_		ORLAND	O, FL 32824			
	09/19/2019		1.	.190002370	059			
3.	Date of filing/registration in Florida	4.			Document n	umber		
5. (a)	Losey PLLC							
J. (u)	Registered Agent and Registered Office shown on the records of	e;						
	1420 Edgewater Drive							
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_	,	1~3	
					_	3 -	7.7	
	Orlando, FL	32804				-	2024 1606 27	•·· ;
(b)	Michael Branco					AtmiSed		;·
(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				_	t: (; . ;	P ::	* * .
	9484 Boggy Creek Road					79: 11: 11:	<u>ي:</u> ئ	`•
	NEW Registered Office Address:				_			
					_			
	Orlando, FL	32824						
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe ability of the li limited	red com mit l lia	l office and ipany, it is ed liability	d the busines s hereby conf y company or	s office o irmed tha	of the re at the ch	gistered lange(s)
Signa	Signature of a member or authorized representative of a member				Printed or typo	ed name of	signee	
provisi the obl to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete igations of my position as registered agent as provided lety reflect a change in the registered office address, I I din writing of this change.	ee to a perform d for in hereby	ct in nan Ch con	n this cape ice of my c apter 605 firm that i	acity. I furthe duties, and I i i, F.S. Or, if i the limited lid	er agree t am famili this docu thility con	to comp ar with ment is mpany i	ly with the and accept being filed has been
Signatu	re of Registered Agent							

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00