L20 0000 67755

Office Use Only



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D 04/24/20

COVER LETTER

	istration Section ision of Corporations							
SUBJECT:	Bargain Bids, LLC							
Name of Limited Liability Company								
Dear Sir or l	Madam:							
The enclose	d Registered Agent/Registered C	office Change and	fee(s) are submitted for filing.					
Please returi	n all correspondence concerning	this matter to the	following:					
Ryan Richter								
-	Name of Person							
	Firm/Company	 	_					
1401 Riverpl	ace Blvd Unit 2905							
	Address							
Jacksonville,	FL 32207							
<u>.</u>	City/State and Zip Code							
ryan@bargai	n-bids.com							
E-mail	address: (to be used for future a	nnual report notif	ication)					
For further i	nformation concerning this matte	er, please call:						
Ryan Richter		720 at (470-1038					
	Name of Person		Area Code & Daytime Telephone Number					
Reg Div P.O	iling Address: distration Section dision of Corporations dispersion Box 6327 dahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enc	losed is a check for the following	ng amount:						
■ \$	25 Filing Fee	S55 Filing Fee & Certified Copy						

INHS18 (2/14)

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.

1. 1	Name of the limited liability company: Bargain Bids, LLC	<u> </u>						
2. (a	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)) 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
3. 5. (a		_ 4.		Document number				
	Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET.) 4666 Harbour N Ct			e: -	SECRETA TALLA	2020 AUG -5		
(b	Ryan Richter Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:	-	RY OF STATE HASSEE, FL	-5 PM 5: 02		
	NEW Registered Office Address: 1401 Riverplace Blvd Unit 2905			-				
	Jacksonville, FL	32207		-				
chang agent was/v	limited liability company is not organized under the law ge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registere ability co of the lim limited l	ed office and mpany, it is ited liability	If the business office thereby confirmed y company or as oth	e of the i	egiste change	red c(s)	
I her provi	nature of a member or authorized representative of a member eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete biligations of my position as registered agent as provided rely reflect a change in the registered office address, I have a first change of Registered Agent	ee to act performe	in this capa	luties, ånd I am fam	e to con viliar wi	h and	accept	

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