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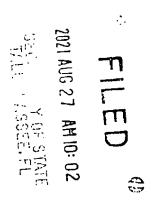
(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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COVER LETTER

TO: Registration Section Division of Corporations								
BLUEBONNET WILCOX, LLC SUBJECT:								
Name of Limited Liability Company								
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.							
Please return all correspondence concerning the	is matter to the following:							
Damaso W. Saavedra								
Name of Person								
Saavedra-Goodwin								
Firm/Company								
888 S.E 3rd Avenue, Suite 500								
Address								
Fort Lauderdale, Florida 33316								
City/State and Zip Code								
dpazo@saavlaw.com								
E-mail address: (to be used for future ann	ual report notification)							
For further information concerning this matter,	please call:							
Deanna Pazo	954 767-6333 at ()							
Name of Person	Area Code & Daytime Telephone Numbe							
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303							
Enclosed is a check for the following	amount:							
■ \$25 Filing Fee	☐ \$55 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.	Na	me of the limited liability company: BLUEBONNET V	VILC	OX, LLC				
2. (a)			(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)				
		4860 NE 12TH AVENUE		4860 NE 12TH AVENUE				
		FORT LAUDERDALE, FL 33334	_	FORT LAUDERDALE, FL 33334				
		03/17/2020		L200000	84130			
3.		Date of filing/registration in Florida	4,		Document number			
5.	(a)	Saavedra, Damaso W, Esq.						
J.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
		SAAvedia- broduin						
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				2021		
		312 S.E. 17th Street Second Floor			(m.	2021 AUG Sechie	A.	
		Fort Lauderdale . FL	3331	6	7, 77 1937 24.52	327		
					 ഗമ മുപ		m	
((b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				AMIO: 02	D	
		Enter name of NEW Registered Agent and/or NEW Registered Office address:						
		Saavedra, Damaso W, Esq.	·		<i>⊕</i>			
		NEW Registered Office Address:						
		888 S.F. 3rd Avenue, Suite 500						
		Fort Lauderdale . FL	3331	6				
cha age was the Si I hi pro the to not	nge nt v arti igna ere obi obi	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 ture of a member of authorized representative of a member by accept the appointment as registered agent and agricular of all standars relative to the proper and complete ligations of newposition as registered agent as provided by reflect a grange in the registered office address. It is an experimental agent and agree of this change.	regis ability of the limit	tered office company, limited liab ed liability	and the business office of the it is hereby confirmed that to the pility company or as otherwice company. Printed or typed name of signature in the pility company.	he regis he chai se prov	stered nge(s) rided in	