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## LLC REGISTERED AGENT CHANGE BILLFISHLANDCO, LLC

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## 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	nme of the limited liability company: BILLFISHLAND	CO, LLC	_	
l. (a)	2965 W STATE ROAD 84	(b	(b) 3051 W STATE ROAD 84	
w. (w,	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	_ (°		ailing address of limited hability company: (Note: MAY BE POST OFFICE BOX)
	FORT LAUDERDALE, FL 33312	_	FORT LAU	DERDALE, FL 33312
	4/10/2020		L2000010079	)1
3. (a)	Date of filing/registration in Florida HAMBY, LOUIS L, III	4,	[	Document number
(u)	Registered Agent and Registered Office shown on the records of 340 ROYAL POINCIANA WAY	the Florida	Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) STE. 321			TALLAN T
	PALM BEACH, FL_	33480		4 30 F
(b)	C T Corporation System			SEE OF PAR
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	lress.	TALLAHASSEE FLORIDA
	NEW Registered Office Address:			
	1200 South Pine Island Road			
	Plantation FL	33324		
the cha agent v was/we	imited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	the regis bility con f the limi limited li	tered office ampany, it is intended in the second contraction of the s	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	ure of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I have the change of this change.  CT Corporation System Pakata Pictory	ee to act performe I for in ( pereby co	in this canae	city. I further agree to comply with the
By: Signatu	te of Registered Agent Natalie Pickens, Assistant Secretary			