0013125

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

			REFERENCE	:	
			AUTHORIZATION	;	Sould de man
			COST LIMIT	:	$U \setminus I$
ORDER	DATE	:	July 1, 2024		
ORDER			9:19 AM		

ORDER NO. : 529168-070

CUSTOMER NO: 7560577

ACCOUNT NO. : I2000000195

CHANGE OF AGENT

NAME: BAINBRIDGE NONA NORTH MEMBER,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
X PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER:

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. N	lame of the limited liability company:BAINBRIDGE	NONA N	ORTH MEMI	BER, LLC				
2. (a)	12765 W. Forest Hill Rlvd		(b) 12765 W. Forest Hill Blvd.					
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 1307		(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Suite 1307					
					··			
	Wellington, FL 33414		Wellington, FL 33414					
	05/19/2020		L20000131	259				
3.	Date of filing/registration in Florida	4.		Document number				
5. (a)	BCRA, LLC							
J. (a)	Registered Agent and Registered Office shown on the records	of the Florid	a Dept. of State	- e:				
	1905 N.W. CORPORATE BLVD.							
	Registered Office Address (MUST BE FLORIDA STREE	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	SUITE 310							
	Boca Raton	33431 FL_		-				
	-		_	-	20 JA J			
(b)		-	<u></u>					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office ac	<u>idress</u> :	-				
	Corporation Service Company							
	NEW Registered Office Address:	_	<u> </u>	-				
	1201 Hays Street		-	-				
	Tallahassee	32301						
If the I	imited liability company is not organized under the l	aws of the	State of Flo	rida, it is hereby conf	firmed that after the			
was/wa	e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	nability co s of the lin	ompany, it is iited liability	hereby confirmed that company or as other	at the change(s)			
/s/ Cl	hris Phillips	Chr	is Phillips, A	uthorized Representa	ative			
•	ture of a member or authorized representative of a member		Printed or typed name of signee					
provisi the obl to mere	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet igations of my position as registered agent as provid ely reflect a change in the registered office address, i d in writing of this change.	gree to act le perform led for in (I hereby co	in this capa ance of my d Thapter 605, infirm that th	city. I further agree of the stand I am famili F.S. Or, if this document the limited liability co.	to comply with the far with and accept ment is being filed mpany has been			
Signatu	re of Registered Agent							

Elizabeth A. Dawson, Asst. Vice President on behalf of Corporation Service Company
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
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