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S. HRATH

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	PATRIOT TITLE, LLC						
		Name of Limited Li	ability Company				
Dear Si	r or Madam:						
The enc	losed Registered Agent/Registered (Office Change and	fee(s) are submitted for filing.				
Please r	eturn all correspondence concerning	, this matter to the f	ollowing:				
Wayne I	Harrell						
	Name of Person						
BPM SO	DLUTIONS, LLC						
	Firm/Company						
1605 S	ALEXANDER ST, SUITE #102						
	Address						
PLANT	CITY, FL 33563						
	City/State and Zip Cod	e	_				
payable	s@bpm-sol.com						
——E-	mail address: (to be used for future	annual report notific	cation)				
For furt	her information concerning this matt	ter, please call:					
Michael	LaRosa	813 at (382-3880				
-	Name of Person		Area Code & Daytime Telephone Number				
	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	ing amount:					
■ \$25 Filing Fee			5 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. N	ame of the limited liability company: PATRIOT TITE	.E, LLC				
2. (a)	229 EAST LEMON STREET		(b) 1605 SOU	JTH ALEXANDER ST		
-· (-) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited (Note: MAY BE POST)	-	
	TARPON SPRINGS, FL 34689		SUITE 102			
			PLANT C	ITY, FL 33563		
	01/27/2021		L21000050	753		
3.	Date of filing/registration in Florida	4.		Document number	•	
5. (a)	Holloway Law, P.A.					
J. (a)	Registered Agent and Registered Office shown on the records of	of the Flori	da Dept. of Stat	ee:		
	4114 W. San Juan Street				_	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				<u>. </u>	7822 SEP
(b)				_		33S
	Tampa, F	L_33629		_	· ·	5
	BPM SOLUTIONS, LLC				73;	70
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			-	<u>;</u>	-: -: to
	1605 S ALEXANDER ST				÷.,	σ
	NEW Registered Office Address:	,		_		
	SUITE #102			_		
	PLANT CITY	L 33563				
chang	limited liability company is not organized under the le e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited	aws of the	red office an	d the business office o	f the reg	istered
was/w	ere authorized by an affirmative vote of the members	of the li	mited liabilit	y company or as other	wise pro	ovided in
the ar	ticles of organization or the operating agreement of th		•	npany. I, as COO of Managing N	1ember	
Sign	ature of a member or authorized representative of a member			Printed or typed name of		
nroun.	eby accept the appointment as registered agent and agents of all statutes relative to the proper and completed ignations of my position as registered agent as provided by reflect a change in the registered office address, and in writing of this change.	e perfori led for in I hereby	manaa at mii	dutice and Law tamel	CW WILLES	and account