## L21000193485

(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									

Office Use Only



400431830174

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 529168 7560577

AUTHORIZATION :

COST LIMIT : \$ 25.00 \

ORDER DATE : July 1, 2024

ORDER TIME : 9:31 AM

ORDER NO. : 529168-083

CUSTOMER NO: 7560577

## CHANGE OF AGENT

NAME: BAINBRIDGE WATERGATE 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.	Name of the limited liability company:  BAINBRIDGE WATERGATE MEMBER, LLC										
2	(a)	12765 W. Forest Hill Blvd.	(	b)	12765 W	/. Forest Hill B	lvd.	-			
	()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)						•		
		Suite 1307		Suite 1307							
		Wellington, FL 33414	<del></del>		Wellington, FL 33414						
		05/04/2021		L	21000193	3485					
3.		Date of filing/registration in Florida	4.			Document nu	ımber				
5	(a)	BCRA,LLC									
J.	(11)	Registered Agent and Registered Office shown on the records of 1905 NW CORPORATE BLVD	Dept. of Stat	de:	-T	20					
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_		2024 JUL 15	41			
		LYNN FINANCIAL CENTER, SUITE 310					LAHASS		= 11		
	(b)	Boca Raton FL	33431		•	<del>-</del> -		SSEE C			
							Ö				
	` ,	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	AM II: 33					
		Corporation Service Company					Þ				
		NEW Registered Office Address:				_					
		1201 Hays Street				_					
		Tallahassee , FL	32301								
cha age wa	ange ent v s/we	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 lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register ability co of the lin	ed om nit	office and pany, it is ed liability	d the business s hereby confi y company or	office of rmed that	the reg	istered inge(s)		
	/s/ Chris Phillips				Chris Phillips, Authorized Representative						
- 5	Signat	ture of a member or authorized representative of a member			·	Printed or types	d name of si	ignee			
pro the to	ovisi obl. mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is in the registered of the address. It is not this change.	ee to act perform I for in ( tereby c	t ir tan Ch con	n this cape ce of my c apter 605 firm that i	acity. I further, duties, and I a i, F.S. Or, if the limited liam	r agree to m familia his docum bility com	o comply or with a nent is b npany he	y with the ind accept eing filed as been		
_7	luje	he aklan									

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

Elizabeth A. Dawson, Asst. Vice President on behalf of Corporation Service Company

INH\$18 (2/14)