## 21000507215

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 529168 7560577								
AUTHORIZATION :								
COST LIMIT : \$25000 Clad-								
ORDER DATE : July 1, 2024								
ORDER TIME : 10:53 AM								
ORDER NO. : 529168-053								
CUSTOMER NO: 7560577								
CHANGE OF AGENT								
NAME: BAINBRIDGE MANAGEMENT SERVICES I, LLC								
1, 220								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
PLEASE RETORN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Amanda Miller 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.

2. (a)	12765 W. Forest Hill Blvd.		(b) 12765 W.	Forest Hill Blv	/d.	2024		
(, -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Alailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
	Suite 1307		Suite 1307		;	Üī	, i	
	Wellington, FL 33414		Wellington	, FL 33414	L, -	Ī	Ear	
	11/30/2021		L210005072	215		7: 44	**************************************	
3.	Date of filing/registration in Florida	4.	[	Document nui	nber			
5. (a)	BCRA,LLC							
	Registered Agent and Registered Office shown on the records of t 1905 NW CORPORATE BLVD	he Flori	da Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) LYNN FINANCIAL CENTER, SUITE 310							
	Boca Raton, FL	33431						
(b) .	Enter name of NEW Registered Agent and/or NEW Registered	Office	nideor.					
		(/IIICC	idate 44.					
	Corporation Service Company							
	NEW Registered Office Address:							
	1201 Hays Street		· <del>-</del> · · ·					
	Tallahassee , FL	32301						
:hange igent w was/we	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of the organization or the operating agreement of the	registe bility of f the li	red office and company, it is mited liability	the business of hereby confirmation of a	office of the med that the	register change	ed (s)	
	ris Phillips		Chris Phillips, Authorized Representative					
Signati	are of a member or authorized representative of a member			Printed or typed	name of signe	e		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Quale a Nan

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