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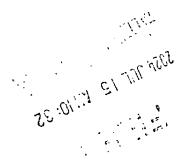
(Requestor's Name)				
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 529168 AUTHORIZATION: Spelbele man COST LIMIT : \$ 25.00 ORDER DATE : July 1, 2024 ORDER TIME : 10:48 AM ORDER NO. : 529168-045 CUSTOMER NO: 7560577 CHANGE OF AGENT NAME: BAINBRIDGE GRAND NATIONAL MEMBER LLC PLEASE RETURN 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.

I. Na	ame of the limited liability company: BAINBRIDGE (GRAND	NATIONAL	MEMBER LLC
2. (a)	12765 W. Forest Hill Blvd.	((b) 12765 W. Forest Hill Blvd.	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		<u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 1307		Suite 13	07
	Wellington, FL 33414		Wellingt	on, FL 33414
	12/08/2021		L2100051	8603
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	DEUTCH JEFFREY			
J. (a)	Registered Agent and Registered Office shown on the records of	the Floric	la Dept. of Sta	ate:
	1905 N.W. CORPORATE BLVD.			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>(S)</u>	- 202
	LYNN FINANCIAL CENTER, SUITE 310		•	
	Boca Raton . F	33431 L		1021 JUL 15
	•			F.110: 32
(b)				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	ddress:	. ني
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee . Fi	32301		
	, 17	l.,		_
change agent v was/we	imited liability company is not organized under the la or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e register lability co of the lir	ed office arompany, it nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
/s/ Cl	s/ Chris Phillips Chris Phillips,		Authorized Representative	
Signa	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 agens 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. It in writing of this change.	ree to ac perform d for in hereby c	t in this cap ance of my Chapter 60 onfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been

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

INHS18 (2/14)