## L22000420250

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CORPORATION SERVICE COMPANY 1201 Hays Street

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	ACCOUNT NO.	:	12000000	195		
	REFERENCE	:	529168	7560577		
	AUTHORIZATION	;				
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NAME: BAINBRIDGE MCCRIMMON MEMBER, LLC						
RETURN	THE FOLLOWING AS	PR	OOF OF FIL	ING:	AH 11: 34	
	FIED COPY					
10	ATE : IME : C. : R NO:	REFERENCE  AUTHORIZATION  COST LIMIT  ATE: July 1, 2024  IME: 8:57 AM  D.: 529168-059  R NO: 7560577  CHANGE OF A  NAME: BAINBRIDGE MC LLC	REFERENCE :  AUTHORIZATION :  COST LIMIT :  ATE : July 1, 2024  IME : 8:57 AM  D. : 529168-059  R NO: 7560577  CHANGE OF AGEN  NAME: BAINBRIDGE MCCRI LLC	REFERENCE : 529168  AUTHORIZATION :  COST LIMIT : \$ 25.00  ATE : July 1, 2024  IME : 8:57 AM  D. : 529168-059  R NO: 7560577  CHANGE OF AGENT  NAME: BAINBRIDGE MCCRIMMON MEMBE LLC	COST LIMIT : \$ 25.0 multiple rad.  ATE : July 1, 2024  IME : 8:57 AM  D. : 529168-059  R NO: 7560577  CHANGE OF AGENT  NAME: BAINBRIDGE MCCRIMMON MEMBER,	

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.	Na	ame of the limited liability company:  BAINBRIDGE N	MCCRII	MM	ION MEMBER, LLC			
2	(a)	12765 W. Forest Hill Blvd.		(b)	12765 W. Forest Hill B	Blvd.		
	(4-)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Suite 1307	_	(5)	Mailing address (Note: MAY)	of limited liability company:  BE POST OFFICE BOX)		
		Suite 1307	_		Suite 1307			
		Wellington, FL 33414	_		Wellington, FL 33414			
		09/27/2022		l	L22000420250			
3.		Date of filing/registration in Florida	4.	_	Document nu	umber		
5.	(a)	BCRA, LLC						
(b)	(-/	Registered Agent and Registered Office shown on the records of 1905 N.W. CORPORATE BLVD	Dept. of State:					
		Registered Office Address (MUST BE FLORIDA STREET	<del></del>	7. <b>20</b>				
		SUITE 1307				24 J		
		Boca Raton . FI	3343	1		FILAHASSE		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>							
		Corporation Service Company				DA DA		
		NEW Registered Office Address:						
		1201 Hays Street						
		Tallahassee FI	3230	1_				
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 like the authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe ability of the 1	erec cor imi	d office and the business npany, it is hereby confited liability company or	s office of the registered irmed that the change(s)		
/s/ Chris Phillips			<u>C</u>	Chris Phillips, Authorized Representative				
II pro the to t	nerel ovisi obli mere tified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agr ons of all statules relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address. It I in writing of this change.	cee to a perfor d for it hereby	ict i mai i Ci coi	in this capacity. I furthe	ed name of signee or agree to comply with the sum familiar with and accept his document is being filed ability company has been		
	natu	re of Registered Agent eth A. Dawson, Asst. Vice President on behalf of Corporation	n Servi	ice (	Company			

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