## M0300001374

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: I20000000088 3/2/18 Date:\_ **KEN HOWELL** Name: C021577 Reference #:\_\_\_\_ Entity Name: BOUNDS AND GILLESPIE ARCHITECTS, PLLC Articles of Incorporation/Authorization to Transact Business Amendment ✓ Change of Agent Reinstatement **ISSUES - CALL KEN @** Conversion 518-213-0738 J Merger Dissolution/Withdrawal Tictitous Name Other \_\_\_\_\_

Authorized Amount:

\$25.00

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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: BOUNDS	AND GILLESPIE AR	CHITECTS, PLLC
<ol> <li>(a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)</li> </ol>	Rny: 7975 STAGE HILLS BL	VD, SUITE 4
(TVDEL MADON HANGED TELEVISION)	MEMPHIS, TN 38133-4010	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	7975 STAGE HILLS B	LVD, SUITE 4
	MEMPHIS, TN 38133-4010	
April 29, 2003	M03000001374	7 S 8
3. Date of filing/registration in Florida	4. Document number	題黃卫
5. (a) Registered Agent and Registered Office shown of	on the records of the Flor	ida Degra of State:
Registered Agent:	GILLESPIE, JIM	200 F
Registered Office Address:		ORES 3
	14112 Greentree Trail	- <del>5</del>
	WELLINGTON, FL 334	114-4027
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office	address:
NEW Registered Agent:	COGENCY GLOBAL INC.	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	115 North Calhoun St., Suite 4	
	Tallahassee	FL 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the birdited hability company or as other the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member  Paul D. Gillespie, Sr  Printed or typed name of signee  I hereby accept the appointment as registered agent and	e Florida street address of entical. Or, in the case of the case o	f the registered office f a Florida limited by an affirmative vote of cles of organization or
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 605, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	proper and complete per position as registered as merely reflect a change i	formance of my duties, sent as provided for in n the registered office

Signature of Registered Agent Sean Honan, Assistant Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00