M0000002847

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

Office Use Only



000287344810

07/07/16--01017--007 **25.00

2016 JUL - T A II: 35 SECRETARY OF STATE, ALLAHASSEE, FLORIDA

> JUN 0 8 2018). BRUCE



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

REGISTRATION SECTION DIVISION OF CORPORATIONS To:

Janis M. Smith From: janis.smith@cscglobal.com

Date: July 5, 2016

Order#: 187735-005

BEDFORD CAPITAL SOUTHEAST, LLC

Enclosed please find:

Change of Registered Agent and Office.

Check in the amount of \$25___.

Please take the following action:

File in your office on a routine basis. XX

Issue Proof of Filing.

Please return evidence to the following:

Attn: Janis M. Smith

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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. N	ame of the limited liability company: BEDFORD CAP	ITAL SC	UTHEAST	, LLC	
2. (a)	431 EAST HORATIO AVENUE STE 310	_ (b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		יו	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	:
	MAITLAND FL 32751				
	05/22/2006		M060000	02847	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a) NRAI SERVICES, INC				
`	Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of State	- е:	
	1200 SOUTH PINE ISLAND ROAD				
	Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRESS</u>	<u>)</u>	_	
				_	
	Plantation , FL	33324		- - \$\overline{\	
(b)	Corporation Service Company			- 2016 JUL	
	Enter name of NEW Registered Agent and/or NEW Registered (Office add	lress:	ASSEM TIME	
	1201 Hays Street			marine Property of the Propert	
	NEW Registered Office Address:			SEATH 35	
	Tallahassee , FL_	32301		_	
the chagent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members of tices of organization or the operating agreement of the l	the regis bility co the lim	tered office mpany, it is ited liability	e and the business office of the regist s hereby confirmed that the change(s y company or as otherwise provided	tered
	Sie E. Cionei	Jill C	ilmi, Autho	prized Person	
I here provis the ob to men notifie	ature of a member or authorized representative of a member by accept the appointment as registered agent and agresions of all statutes relative to the proper and complete publications of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change. ure of Registered Agent Corporation Service Company	performa for in C ereby ca	ance of my c Chapter 605 Infirm that	Printed or typed name of signee acity. I further agree to comply with duties, and I am familiar with and acongly. F.S. Or, if this document is being the limited liability company has been the liability company has been the limited liability liability company has been the limited liability liab	ı the ecept filed en
I here provis the ob to men notifie	eby accept the appointment as registered agent and agre- tions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided rely reflect a change in the registered office address, I he ad in writing of this change.	performa for in C ereby ca	ance of my c Chapter 605 Infirm that	acity. I further agree to comp duties, and I am familiar with 5, F.S. Or, if this document is the limited liability company h	and ac being j has bee

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