

#M06000007068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

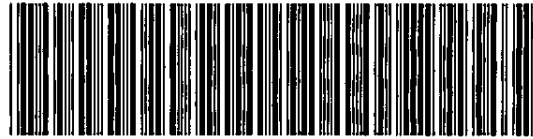
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 MAR 10 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
MAR 12 2014

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**NATIONAL
REGISTERED
AGENTS, INC**

Filing Request

March 4, 2014

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee FL 32314

Subject:	BASCOM SOUTHERN, LLC Document no.: M99000000422
Form(s) Enclosed:	STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY
Amount of check enclosed:	\$25.00, <i>please issue a receipt</i>
Payable to:	FL DEPT. OF STATE
Return Via:	Regular mail
Filing Method:	ROUTINE

**If you have any questions, or if you cannot process this request for any reason,
please do not hesitate to contact me at the number listed below.**

Please return to:

Loretta McCool

Unisearch, Inc.

3533 Fairview Industrial Dr. SE

Salem, OR 97302-1155

Ph: 800-554-3113 Ext: 1010

Fax: (800) 554-3114

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Date filed: _____ Ack received: _____ Database: _____ Fee paid: _____

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

Pursuant to the provisions of sections 608.416 or 608.508, 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: Bascom Southern, LLC

2. (a) Principal office address of limited liability company: One SW Columbia St Ste 1700
Portland, OR 97258
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: One SW Columbia St Ste 1700
Portland, OR 97258
(Note: MAY BE POST OFFICE BOX)

12/20/2006

3. Date of filing/registration in Florida

M06000007068

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Corporation Service Company

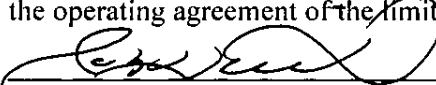
Registered Office Address: 1201 Hays Street
Tallahassee, FL 32301-2525

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: NRAI Services, Inc.

NEW Registered Office Address: 1200 South Pine Island Road
(MUST BE FLORIDA STREET ADDRESS)
Plantation, FL 33324

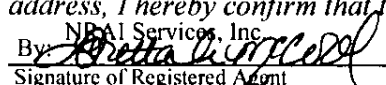
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

John S. Gilleland, President

Printed or typed name of signer

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 608, 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.

By NRAI Services, Inc.

Signature of Registered Agent
Loretta A. McCool, Assistant Secretary

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

FILING FEE: \$25.00