M07000006189

(Requestor's Name)					
(Address)					
(Address)					
(in the second					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
, ,					
(0					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: November 12, 2020

Order#: 504081-008

Re: BECK ARCHITECTURE, LLC

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive 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.

OUCA.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. Na	ame of the limited liability company:	HITECTURE, I	LC		
2. (a)	1601 Elm Street, Suite 2800	(b)		. <u>. </u>	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Dallas, TX 75201				
	10/15/2007	М	07000006189		
3.	Date of filing/registration in Florida	4.	Document numb	er	
5. (a)	C T Corporation System				
J. (=)	Registered Agent and Registered Office shown on the record	ept. of State:			
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)			
	Plantation	, FL_33324		<u>i</u> c. 16	
(b)	Enter name of NEW Registered Agent and/or NEW Regist	tered Office addr		-	
				P 1 5 1	
	Corporation Service Company			. ⇔ .>. ~	
	NEW Registered Office Address:			2	
	1201 Hays Street	<u> </u>			
	Tallahassee	, FL 32301			
change agent was/w	limited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membricles of organization or the operating agreement of	f the registered ed liability com ers of the limite	office and the business off pany, it is hereby confirme ed liability company or as o	fice of the registered ed that the change(s)	
/s/ Jill Cilmi		Jill Cil	Jill Cilmi, Authorized Person		
-	ature of a member or authorized representative of a member		Printed or typed nar		
provis the ob to mer	by accept the appointment as registered agent and ions of all statutes relative to the proper and comp ligations of my position as registered agent as provely reflect a change in the registered office addressed in writing of this change.	l agree to act in lete performan vided for in Chi s, I hereby conj	this capacity. I further as se of my duties, and I am fi apter 605, F.S. Or, if this of firm that the limited liabili	gree to comply with the amiliar with and accept document is being filed ty company has been	
	Cumley	Corporation	Service Company		
Signature of Registered Agent Am			ni M. Casper, Asst. Vice President		

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