M08000005285

| (Re | questor's Name) | ··· · · · · | | | | |
|---|--------------------|-------------|--|--|--|--|
| (Ad | dress) | | | | | |
| (Ad | dress) | | | | | |
| (Cit | ty/State/Zip/Phone | #) | | | | |
| PICK-UP | ☐ WAIT | MAIL · | | | | |
| (Bu | siness Entity Nam | ne) | | | | |
| (Document Number) | | | | | | |
| Certified Copies | _ Certificates | of Status | | | | |
| Special Instructions to Filing Officer: | | | | | | |
| | | · | | | | |
| | | | | | | |
| | | | | | | |

Office Use Only



800278288078

11/05/15--01032--001 **25.00

N. Guillean 107 13 20151



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

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

Date: November 3, 2015

Order#: 846067-006

Re: BLD SERVICES, 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: 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 co | ompany: BLD SERVICE | SLLC | | | |
|--|--|--|---|---|--|--|
| 2. (a) | 2424 TYLER STREET | | (b |) | | |
| | | f limited liability company: STREET ADDRESS) | | | Mailing address of limited (Note: MAY BE POST | |
| | KENNER | LA 70062 | <u>.</u> | | | |
| | 12/04/2008 | | | M080000 | 05285 | |
| 3. | Date of filing/regis | tration in Florida | — 4. | | Document number | |
| 5. (a) | C T CORPORATION SY | 'STEM | | | | |
| | Registered Agent and Registered | Office shown on the records o | f the Florida | Dept. of Stat | e: | |
| | 1200 SOUTH PINE ISLAI | ND ROAD | | | | |
| | Registered Office Address (M | <u>UST BE FLORIDA STREET</u> | ADDRESS | 2 | _ | SEC SEC |
| | | | | | | A Service August |
| | PLANTATION | , F | L <u>33324</u> | | - | FILE CHELVISIE |
| (b) | Corporation Service Comp | anv | | | | |
| (0) | Enter name of NEW Registered | | d Office add | dress: | _ | (/) |
| | | | | | | 8: 40 1ATE 0RHD |
| | 1201 Hays Street | | | | _ | , |
| | NEW Registered Office Address | : | | | | |
| | Tallahassee | P | r 20204 | | - | |
| | Tallallassee | , r | L <u>32301</u> | | _ | |
| the cha agent was/w | imited liability company is range or changes are made, the will be identical. Or, in the cere authorized by an affirmaticles of organization or the o | e Florida street address of a Florida limited living to the work of the members | of the regis iability co of the lim | stered office mpany, it i ited liabilit | e and the business offi s hereby confirmed th y company or as other | ice of the registered at the change(s) |
| | Dec. | | Don | a Priebe, A | uthorized Person | |
| | | resentative of a member | | | Printed or typed name of | |
| provision the object of the ob | by accept the appointment a ions of all statutes relative to ligations of my position as re ely reflect a change in the re d in writing of this change | o the proper and complete gistered agent as providing gistered office address, l | e performa ed for in C hereby co | ance of my Chapter 605 Onfirm that | duties, and I am famil 5, F.S. Or, if this docu the limited liability co | liar with and accept ment is being filed ompany has been |
| Signatu | ire of Registered Agent Corpora | tion Service Company | BY: G | race E. Ki | rby, Asst. Vice Presi | ident |