M0900000 2248

(Requestor's Name)										
(Address)										
(Address)										
(City/State/Zin/Dhone th										
(City/State/Zip/Phone #)										
PICK-UP WAIT	MAIL									
(Business Entity Name)										
(Document Number)										
0.45.40.40.40.40.40.40.40.40.40.40.40.40.40.										
Certified Copies Certificates of Status										
<u></u>										
Special Instructions to Filing Officer:										

Office Use Only



800290844908

10/04/16--01037--017 **25.00

16 OCT -4 MM H: 26

OCT 0 6 2016 Y SULKER



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: September 30, 2016

Order#: 296682-204

Re: BLC-GFB MEMBER, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Mary Rivers

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.	Na	me of the limited liability company: BLC	-GFB MEMB	ER, LLC				<u>.</u>	
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		BRENTWOOD, TN 37	027	- -					
2		06/16/2009		_	M0900000	-			
3.		Date of filing/registration in Flori	.da	4.		Document numbe	r		
5.	(a)	C T CORPORATION SYSTEM	<u> </u>		·				
		Registered Agent and Registered Office shown on t	he records of the	e Florida	Dept. of State	:			
		1200 SOUTH PINE ISLAND ROAD							
		Registered Office Address (MUST BE FLORIL	OA STREET AI	DDRESS)					
		PLANTATION	, FL_	33324			$\begin{array}{c} \frac{ K }{2} K \\ \frac{ K }{$	15 O	
	(L)	Corporation Service Company					3,4 °	TOO	
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEV	W Registered C	Office add	ress:			<u></u>	!
							- 1		
		1201 Hays Street					, ;	meil Er	251.00
		NEW Registered Office Address:		·	 			r _o	
							.	O)	
		Tallahassee	, FL_	32301					
the age wa the	cha ent w s/we arti	mited liability company is not organized unge or changes are made, the Florida street will be identical. Or, in the case of a Florid re authorized by an affirmative vote of the cles of organization or the operating agreer	address of the alimited liab members of the li	he regist pility con the limi	tered office mpany, it is ted liability	and the business hereby confirmed company or as of	office of I that the	the re	egistered ge(s)
	·	ure of a member or authorized representative of a m		Jill C		ized Person	6		
I l pro the to no	iereb ovisie obli mere tified	oy accept the appointment as registered agons of all statutes relative to the proper an igations of my position as registered agent by reflect a change in the registered office in writing of this change.	ent and agred d complete p as provided address, I hë	erforma for in C ereby co	in this capa nce of my a hapter 605, nfirm that t	Printed or typed nam icity. I further aga luties, and I am fa F.S. Or, if this d he limited liability by, Assistant Vice	ree to co miliar w ocument ocompa	mply eith an is be ny has	with the od accept ing filed s been