## H10000001353

(F	Requestor's Name)		
(A	Address)		
· (A	Address)		
. (0	City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
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(Document Number)			
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SEGRETARY OF STATE

## VIA US MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: BRSW, LLC

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$25.00 LLC to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

Ryan EAMIS

If you have any questions regarding this filing, feel free to contact the undersigned directly at (888) 705-7274.

Respectfully,

LEANA GUZMAN

REGISTERED AGENT SOLUTIONS, INC.

## 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.

Name of the limited liability company:	BRSW, LLC
2. (a) Principal office address of limited liability company	5005 LBJ FREEWAY, SUITE 1200
(Note: MUST BE STREET ADDRESS)	DALLAS TX 75244
(b) Mailing address of limited liability company:	5005 LBJ FREEWAY, SUITE 1200
(Note: MAY BE POST OFFICE BOX)	DALLAS TX 75244
03/23/2010	M1000001353
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	BUSINESS FILINGS INCORPORATED
Registered Office Address:	515 E. PARK AVENUE
	TALLAHASSEE FL 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
NEW Registered Agent:	Registered Agent Solutions, Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Dr. Suite A Tallahassee,FL32301
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member.  Alan L. Murray  Printed or typed name of signee  I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	aws of the State of Florida, it is hereby orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.  A SSEE TARY OF THE TARY

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