M11000003704

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

Office Use Only



400439048264

FILED
2024 HOV -5 AM 10: 53



CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	:	1200000	0195							
REFERENCE	:	698024	8465214							
AUTHORIZATION	:		.0 ~							
COST LIMIT	:	\$ 25.0	Chille Stewar							
ORDER DATE: October 14, 2024]									
ORDER TIME : 2:24 PM										
ORDER NO. : 698024-002										
CUSTOMER NO: 8465214										
	- -									
CHANGE OF AGENT										
NAME: BRTS HOLDINGS	э, L	LC								
DIELOR DOMINI TUE DOLLOUTUS LO		000 00 00								
PLEASE RETURN THE FOLLOWING AS	PR	OOF OF FI	LING:							
CERTIFIED COPY XX PLAIN STAMPED COPY										
CONTACT PERSON: Shauna Godbol	.t									
E>	(AMI	NER'S INI	TIALS:							

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.	Nai	me of the limited liability company: BRTS HOLDING	SS, LLC							
2. (1	1)		((b)						
,	-, -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	(b)						
		190 North Westmonte Drive			190 North	n Westmonte Drive				
		Altamonte Springs, FL 32714		<i>A</i>	Altamonte	e Springs, FL	. 32714			
		07/21/2011		М	1100000	3704				
3.		Date of tiling/registration in Florida	4.	_		Document n	umber			
5. (a)	C T CORPORATION SYSTEM								
-/- (Registered Agent and Registered Office shown on the records of t	he Floric	da D	ept. of Stat	e:				
		1200 SOUTH PINE ISLAND ROAD								
		Registered Office Address	_							
							Z.	2024 NOV		
		PLANTATION FL.	33324			_	ÄLLÄHÄSSEE FLORIDA	77		
							iss.	5	-	
(t			_	نياز		m				
		Enter name of NEW Registered Agent and/or NEW Registered Office address:					F.:	AM 10:		
		Corporation Service Company					R10A	: 53		
		NEW Registered Office Address:								
		1201 Hays Street								
		Tallahassee FL	32301							
chan agen was/ the a	ge t w we irtic	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ie Nelson	register bility c f the lin limited	red com mite Hiał	office an pany, it is ed liability pility con	d the busines s hereby conf y company o	s office of irmed that r as otherw	the reg the cha	istered inge(s)	
-	Signature of a member or authorized representative of a member					Printed or typed name of signee				
		ov accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. I have the property of this change	ee to ac perforn I for in vereby c	et in name Che conf	this capa ce of my c upter 605 irm that	acity. I furth duties, and I 5, F.S. Or, if the limited lie	er agree to am familia this docum ability com	compl r with c ent is b pany h	with the ind accept eing filed as been	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00 698024