M15 00000 5633

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





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11/19/20--01012--003 ++25.00

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RIACH

Jim



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: November 17, 2020

Order#: 518973-007

Re: BCP PROPERTIES, 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: Erika Zavala Daza

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.

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.

Name of the limited liability company: BCP PROPERTIES, LLC						
?	(a)	1 Custom House St	(t	1 Cus	tom House St	
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (`	<u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Suite 4		Suite 4	1	
		Providence, RI 02903	_	Provid	ence, RI 02903	
		07/17/2015		M15000	0005633	
3.		Date of filing/registration in Florida	4.		Document number	
5	(a)	TASCA, RICHARD R				
	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State			State:	
		429 Lenox Ave		<u> </u>		
		Registered Office Address (MUST BE FLORIDA STREET A Unit 423	DDKESS	ODRESS)		
		Miami Beach	33139	-		
		, FL				
	(b)				1	
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:		
					a	
		Corporation Service Company				
		NEW Registered Office Address:			••	
		1201 Hays Street			09	
		Tallahassee , FL	32301		<u> </u>	
ch ag wa	ange ent v is/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registere bility co f the lim	ed office impany, nited liab	and the business office of the registered it is hereby confirmed that the change(s) oility company or as otherwise provided in	
	/	s/ Richard Tasca	Ric	hard Tas	sca, Authorized Signer	
- 5	Signa	ture of a member or authorized representative of a member			Printed or typed name of signee	
pri the to	ovisi 2 obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete igations of my position as registered agent as provided thy reflect a change in the registered office address. I have In writing of this change.	ee to act perform for in (ereby co	in this cance of n Chapter (Onfirm th	capacity. I further agree to comply with the ny duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed nat the limited liability company has been	
Si	gnatu	re of Registered Agent				

Grace E. Kirby, Asst Vice President of Corporation Service Company
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00