M 1500006734

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J. HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 431112 7391888

AUTHORIZATION: Smelle Comment

COST LIMIT : \$\sigma55\diangle00

ORDER DATE: December 20, 2016

ORDER TIME : 10:01 AM

ORDER NO. : 431112-010

CUSTOMER NO: 7391888

CHANGE OF AGENT

NAME: BH SOLUTIONS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS:

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	BH Solutions, LLC	
		of Limited Liability Company
Dear S	ir or Madam:	
The en	closed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please	return all correspondence concerning this	matter to the following:
Valerie	e Hayes	
	Name of Person	
The R	Ol Companies	
	Firm/Company	
1920	Greenspring Drive, Suite 200	
	Address	
Timon	ium, MD 21093	
	City/State and Zip Code	
vhaye	s@theroi.com	
I	E-mail address; (to be used for future annu-	al report notification)
For fu	rther information concerning this matter, p	lease call:
Valeri	e Hayes	443 632-0452 at (
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the following a	mount:
	□ \$25 Filing Fee	■ \$55 Filing Fee & Certified Copy
INHSI	8 (2/14)	

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.

2 (3	9200 Shelbyville Road Suite 210	(1.)	(b) 9200 Shelbyville Road Suite 210		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) 9200 Shelbyville Road Suite 210 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Louisville KY 40222		Louisville KY 40222		
2	08/25/2015		M15000006734		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)			· · · ·		
	Registered Agent and Registered Office shown on the record	ls of the Florida D	ept. of State:		
	1200 SOUTH PINE ISLAND ROAD				
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)			
				<u> </u>	
	PLANTATION	, FL <u>33324</u>			
(h)	Corporation Service Company				
(b)	Enter name of NEW Registered Agent and/or NEW Regist		72		
				ø,	
	1201 Hays Street			<u>හ</u>	
	NEW Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	 		
	Tallahassee	, FL_32301			
	limited liability company is not organized under the ange or changes are made, the Florida street addres				
agent was/w	will be identical. Or, in the case of a Florida limite vere authorized by amaffirmative vote of the members.	ed liability com ers of the limite	pany, it is hereby confirmed the ed liability company or as other	at the change(s)	
agent was/w	will be identical. Or, in the case of a Florida limite	ed liability com ers of the limite f the limited lia	pany, it is hereby confirmed the ed liability company or as other bility company.	at the change(s) wise provided in	
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agent was/w the art sign I here provis the ob- to men	will be identical. Or, in the case of a Florida limite rere authorized by an affirmative vote of the membrateles of organization or the operating agreement of attention of a member or authorized representative of a member appointment as registered agent analysis of all statutes relative to the proper and compilingations of my position as registered agent as provedy reflect a change in the registered office address	ed liability comers of the limite f the limited lia	pany, it is hereby confirmed the ed liability company or as other bility company. ZADV STELLATO Printed or typed name of	at the change(s) wise provided in	
agent was/w the art sign I here provis the ob- to men	will be identical. Or, in the case of a Florida limite vere authorized by an affirmative vote of the membricles of organization or the operating agreement of	ed liability comers of the limite f the limited lia	pany, it is hereby confirmed the ed liability company or as other bility company. ZADV STELLATO Printed or typed name of	at the change(s) wise provided in	

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