

5/2/2017

Division of Corporations



Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

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Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (512)418-6949  
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**LLC REGISTERED AGENT CHANGE  
BVIP CENTER POINT, LLC**

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

2017 MAY -3 AM 10:17

JULIE HASSLER, FLORIDA

17 MAY -3 AM 9:27

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## FL015 - 02/18/2016 Walters Kluwer Online

# 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. Name of the limited liability company: BVIP CENTER POINT, LLC

2. (a) C/O IP CAPITAL PARTNERS, LLC (b) C/O IP CAPITAL PARTNERS, LLC

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

225 NE MIZNER BLVD., SUITE 400

225 NE MIZNER BLVD., SUITE 400

BOCA RATON, FL 33432

BOCA RATON, FL 33432

3. 08/27/2015 Date of filing/registration in Florida 4. M15000006801 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Josh Procacci

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

225 NE Mizner Blvd

BOCA RATON, FL 33432

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

C T Corporation System

NEW Registered Office Address:

1200 South Pine Island Road

Plantation, FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: James M. Halpin Assistant Secretary  
Signature of Registered Agent

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

INRS18 (2/14)