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(ке	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

то:		stration Section . sion of Corporations		
SUBJE	ECT:	Babson Real Estate Advisors, LLC		
		Name of	Limited Lia	ability Company
Dear Si	ir or N	Aadam:		
The en	closed	Registered Agent/Registered Office C	Change and f	ee(s) are submitted for filing.
Please	return	all correspondence concerning this ma	atter to the fo	ollowing:
Michel	le Pagi	nano		
		Name of Person		_
		Firm/Company		_
720 Sh	erwood	d Ct.		
		Address		_
Naperv	ille. II	. 60565		
		City/State and Zip Code		.
rich@b	absoni	re.com		
E	-mail	address: (to be used for future annual	report notific	cation)
For fur	ther in	nformation concerning this matter, plea	ise call:	
Michel	le Pagi		630 at (336-3901
		Name of Person		Area Code & Daytime Telephone Number
	Reg Divi P.O.	ling Address: istration Section ision of Corporations . Box 6327 ahassee. FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Encl	losed is a check for the following am	ount:	
	= \$2	25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy

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.

. (a)		(h)					
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	. (0,		Mailing address of (Note: MAY B	Himited Hab	ility con	npany:
	600 Branch Water Dr.		7 Morse	Dr.			
	St. Johns, FL 32259		Medfield	i, MA 02052			
	8/26/15	;	4150000 0)7004			
•	Date of filing/registration in Florida	- 4		Document nur	nber		
. (a)	Michelle Pagnano						
. (4)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of St	ate:			
	Michelle Pagnano				97	20	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)			Z.	121	
	600 Branch Water Dr.					2022 AUG - 1	1,100000000000000000000000000000000000
	St. Johns , FL	32259		-	AHASSE		9 5
(b)	Kristine Meyer	·				AM 8: 1	O
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	ress:			9	-
	Kristine Meyer						
	NEW Registered Office Address:		···-				
	600 Branch Water Dr.						
	St. Johns-	32259					
hanggent gas/was/was/was/was/was/was/was/was/was/w	limited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the attention of a member or authorized representative of a member or authorized representative of a member of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I did in writing of this change.	registere ability con of the limi limited li	I office a npany, it ted liabil ability co	ind the business is hereby confir ity company or sompany. Printed or typed spacity. I further	office of the med that the sas otherwise name of sign	ne regi: he cha se prov	stered nge(s) rided in

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