M1600009212

(Doguestado Maria)						
(Requestor's Name)						
(Ad	dress)					
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10:	wiChata Min (Dlane)	- 40				
(CII	ty/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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Office Use Only



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7 1 1551 CR 4 12 2023 CORPORATION SERVICE COMPANY

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

ACCOUNT NO. : 12000000195							
REFERENCE : 623291 7404709							
AUTHORIZATION :							
COST LIMIT : \$ 25.00							
ORDER DATE: March 30, 2023							
ORDER TIME : 8:37 AM							
ORDER NO. : 623291-055							
CUSTOMER NO: 7404709							
CHANGE OF AGENT							
NAME: BPP DORAL PLAZA LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY PLAIN STAMPED COPY							
CONTACT PERSON: Alexxis Weiland-sorenson EXAMINER'S INITIALS:							

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. Na	ame of the limited liability company:	BPP DORAL P	LAZA LLC		
2. (a)	10920 Via Frontera, Suite 220		(b)		
<i></i> (")	Principal office address of limited liabi (Note: MUST BE STREET AD.		(%)	Mailing address of limi (Note: MAY BE PC	ited liability company:
	San Diego, CA 92127				
	11/16/2016		M10	6000009212	
3.	Date of filing/registration in F	Torida	4.	Document number	r
5. (a)	C T Corporation System				
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			ot, of State:	
	1200 South Pine Island Road				20
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			#13 # 2023 AFR	
	Plantation	FL	33324		R - 2
	-	, , , , ,			A
(b)					ب س
	Enter name of <u>NEW Registered Agent</u> and/or	NEW Registered	Office address	<u>s</u> :	rs . o
	Corporation Service Company				
	NEW Registered Office Address:			•	
	1201 Hays Street				
	Tallahassee	, FL	32301		
hange gent w vas/we	imited liability company is not organize or changes are made, the Florida street will be identical. Or, in the case of a Florice authorized by an affirmative vote of cles of organization or the operating agr	ed under the law address of the orida limited lia the members o	vs of the Stat registered of ibility compa if the limited	Tice and the business offic my, it is hereby confirmed liability company or as otl	e of the registered that the change(s)
/s/	Jill Cilmi		Jill Cilmi	, Authorized Person	
_	ure of a member or authorized representative of			Printed or typed name	-
l hereb rovisio he obli o mere	by accept the appointment as registered ons of all statutes relative to the proper igations of my position as registered ago by reflect a change in the registered off	agent and agre and complete p ent as provided ice address, I h	ee to act in the performance I for in Chapt pereby confirt	nis capacity. I further agre of my duties, and I am fan ter 605, F.S. Or, if this do m that the limited liability	ee to comply with the niliar with and accept cument is being filed company has been
onjied	I'm writing of this change.	Co	orporation (Service Company	
Signatur	re of Registered Agent	Ar	ni M. Casp	er, Asst. Vice Preside	лt