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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE : 456952 AUTHORIZATION COST LIMIT : \$ 25.00 ORDER DATE: February 3, 2022 ORDER TIME : 9:46 AM ORDER NO. : 456952-086 CUSTOMER NO: 8360133 CHANGE OF AGENT NAME: BRISTOL BAY SHARED SERVICES, LLCPLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

CERTIFIED COPY
XX PLAIN STAMPED 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.

ι.	Na	me of the limited liability company: BRISTOL BAY S	HARE	D SERVIC	CES, LLC			
2.	(a)	7067 Old Madison Pike, Suite 170	(h)				
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- (Mailing address of limited liability company: (Note: MAY BE POST OFFICE ROX)			
		Huntsville, AL 35806	- -					
		03/14/2017		M170000	902123			
 3. 5. 	(a)	Date of filing/registration in Florida C T Corporation System	4.		Document number			
J. ((4)	Registered Agent and Registered Office shown on the records of the 1200 South Pine Island Road	rate:					
		Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS	<u>s)</u>	2022 FEB			
		Plantation, FL_	33324					
(b) .	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	office ad	dress:	_			
		NEW Registered Office Address:						
		1201 Hays Street			_			
		Tallahassee , FL	2301					
char ager was/	ige it w wei	mited liability company is not organized under the laws or changes are made, the Florida street address of the reill be identical. Or, in the case of a Florida limited liabile authorized by an affirmative vote of the members of eles of organization or the operating agreement of the limited liabile.	gistere ility co the lim	d office ar mpany, it ited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in			
/s/	Jill	l Cilmi	Jill	Cilmi, Auth	norized Person			
Signature of a member or authorized representative of a member Printed or typed name of signee								
I he prov the d to m notif	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. Corporation Service Company							
Sign	ature				st. Vice President			