## M19000007718

(Requestor's Name)				
(Address)				
(Address)				
(Addiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
r · · · · · · · · · · · · · · · · · · ·				
Special Instructions to Filing Officer:				
}				

Office Use Only

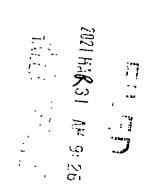


100362894931

04/01/21--01003--017 \*+25.00

RECEIVED

MAR 3 1 2021



NAY 21 2021



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: March 29, 2021

Order#: 730997-004

Re: CBPF, L.L.C.

Enclosed please find:

XX \_\_\_ Change of Registered Agent and Office.

 $\overline{XX}$  Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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)	2922 HATHAWAY ROAD	(b) P	(b) PO BOX 8984	
(ω)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	RICHMOND, VA 23225	RI	CHMOND, VA 23225	
	08/02/2019	M19	9000007718	
	Date of filing/registration in Florida	4.	Document number	
(a)	CT CORPORATION			
	Registered Agent and Registered Office shown on the records o	ot, of State:		
	1200 SOUTH PINE ISLAND ROAD			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
			2 2	
	PLANTATION 33324			
	FL SSET			
(b)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office address		
	Control Control		26	
	Corporation Service Company			
	NEW Registered Office Address:			
	1201 Hays Street		<u></u>	
	Tallahassee	32301		
ange ent w s/we	mited liability company is not organized under the la or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members	e registered of iability compa of the limited	Tice and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in	
	cles of organization or the operating agreement of the /s/ Bonnie L. Wood		nty company. Wood, Vice President of DAVM Corporation, Manag	
	Signature of a member or authorized representative of a member		r. redicerit er er tritt oorporedorf, meneg	

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.

Signature of Registered Agent

Grace E. Kirhy, Asst. Vice President of Corporation Service Company