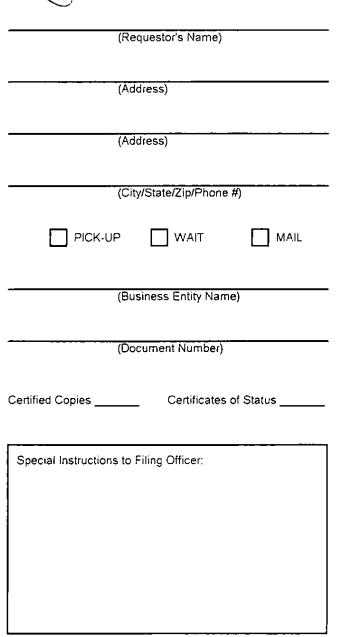
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COVER LETTER .

TO:	Registration Section Division of Corporations		
SUBJE	BBLbc, LLC		
	N	lame of Limited L	iability Company
Dear Si	r or Madam:		
The end	closed Registered Agent/Registered (Office Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning	this matter to the	following:
Kimber	ly Skiba		
	Name of Person		_
BBLbc,	LLC		
	Firm/Company		<u> </u>
22 Cent	ury Hill Drive		
	Address		_
Latham,	NY 12110		
	City/State and Zip Code	2	_
kskiba@)bblbuildingco.com		
E-	-mail address: (to be used for future a	innual report notif	ication)
For furt	her information concerning this matt	er, please call:	
Kimberl	y Skiba	518	213-1032
	Name of Person	(Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following	ng amount:	
	□ \$25 Filing Fee	■ \$:	55 Filing Fee & Certified Copy
INHS18	(2/14)		

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.

	5160 Tennyson Parkway, Plano, TX 75024	(1-	22 Centu	ry Hill Drive, Latham, NY 12110		
. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
. (a)	September 4, 2020 Date of filing/registration in Florida Registered Agents Inc.	4.	M2000000	Document number		
(b)	Registered Agent and Registered Office shown on the records of 7901 4TH ST N	the Florida	Dept. of Sta	ate:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) STE 300					
	St. Petersburg . FL	33702		F1 2023 DEC 3 F/A 1/3		
	BBLbc FL, LLC Enter name of NEW Registered Agent and/or NEW Registered 18302 Highwoods Preserve Parkway NEW Registered Office Address: Suite 310	Office ad	dress:	FILED DEC 28 PHIZ: 57 NUMBER OF STATE NUMBER OF STATE		
	Tampa , FL	33647				
hange gent v vas/we ne arti Matth Signat herel	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the new Bette, Member Poly Consultation Con	registere sbility co f the lim limited li Matt ee to act	ed office armpany, it ited liability conhew Bette	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Printed or typed name of signee pacity. I further agree to comply with the		

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