N0800000643

(Red	questor's Name)			
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2022 APR -5 PH 12: 22
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COVER LETTER

FO: Amendment Section Division of Corporations	
SUBJECT: BRIDGE DEVELOPMENT, C	ORP
Name of Corpo	ration
DOCUMENT NUMBER: N0800000643	
The enclosed Statement of Change of Registered Office/Ag	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Cheyenne Moseley	
Name of Contact	Person
Legalzoom.com, Inc.	
Firm/Compa	any
101 N Brand Blvd., 11th Floor	
Address	
Glendale, CA 91203	
City/State and Z	ip Code
youniquemail@yahoo.com	
E-mail address: (to be used for futur	e annual report notification)
For further information concerning this matter, please call:	
Cheyenne Moseley, Legalzoom.com, Inc.	800 773-0888 ext 9724
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departmen	nt of State.
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florido organized under the laws of the State of egistered agent, or both, in the State of	f Florida	
1. The name of	the corporation: BRIDGE DE	VELOPMENT, CORP		
2. The principa	Loffice address: 1321 Upland E TX 77043	Dr.		
3. The mailing	address (if different):			
4. Date of incorporation/qualification: 01/22/2008 Document number: N080				3
	d street address of the current registe artment of State: (If resigned, enter re	red agent and registered office on file signed)	with the	
	FORM-A-CORP			
	4400 PGA BLVD 900			
	PALM BEACH GARDENS	S, FL 33410		
6. The name an (if changed):	_	Lagent (if changed) and /or registered o	2022 APR SECRE I TALE AHA	77
	United States Corporation	n Agents, Inc.	R-5	
	5575 S. Semoran Blvd. Suite 36		נהן יי	П
	Orlando, FL 32822	NOT acceptable	PH 12: 22 OF STATE OFLORED	O
The street addr	ress of its registered office and the st I be identical.	treet address of the business office of	its registered	agent,
Such change wauthurived by t	as authorized by resolution duly add be board, or the corporation has bee	opted by its board of directors or by a in notified in writing of the change.	n officer so	
Nole	ine of an officer of director	GABY STREHLER, Pro		.
I hereby accep I further agree performance o agent. Or, if th	t the appointment as registered ager to comply with the provisions of all f my duties, and I am familiar with a	nt and agree to act in this capacity. statutes relative to the proper and co ind accept the obligation of my position reflect a change in the registered of	omplete ion as register	ed l
		03/03/2022		
Si	gnature of Registered Agent	Date	_	
Cheyenne Mosele	ehalf of an entity: ey, Assistant Secretary on behalf of rporation Agents, Inc.			
	Exped or Printed Name			

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl 32314 CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *