| FEI Number: 26-2511371 | | | Certificate of Status Des | sired: No |
|--|---------------------------------------|---------|---------------------------|------------|
| Name and Address of Current Registered Agent: | | | | |
| SMITHSON, LIS 11201 CORPOF STE 120 ST PETERSBUI | | | | |
| The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. | | | | |
| SIGNATURE: LISA SMITHSON | | | | 02/23/2015 |
| | Electronic Signature of Registered Ag | gent | | Date |
| Authorized Person(s) Detail : | | | | |
| Title | MGR | Title | MGR | |
| Name | POWERS, GREG | Name | SMITHSON, LISA | |
| Address | 11201 CORPORATE CIR N | Address | 11201 CORPORATE CIR N | |

Current Mailing Address:

333 SOUTH GULFVIEW BOULEVARD

CLEARWATER. FL 33767

Current Principal Place of Business:

DOCUMENT# L08000042926

11201 CORPORATE CIR N **STE 100** ST PETERSBURG, FL 33716 US

FE

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Entity Name: CB BEACHWALK PARTNERS, LLC

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

STE 100

City-State-Zip: ST PETERSBURG FL 33716

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GREG POWERS

MANAGER

STE 120

City-State-Zip: ST PETERSBURG FL 33716

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 23, 2015 Secretary of State CC9669628526

Date