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: GERALD W. BRASE	MANAGING MEMBER	01/15/2020	

SIGNATURE: GERALD W. BRASE

Electronic Signature of Signing Authorized Person(s) Detail

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000180427

Entity Name: 30A LIFESTYLE LIVING II, LLC

Current Principal Place of Business:

2755 AMERICUS DRIVE THOMPSONS STATION, TN 37179

Current Mailing Address:

P.O. BOX 682241 FRANKLIN, TN 37068

FEI Number: 82-2597177

Name and Address of Current Registered Agent:

THACKER, CARLOTTA 304 MAGNOLIA AVENUE PANAMA CITY, FL 32401 US

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:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	FLORES, MONIQUE	Name	BRASE, GERALD W
Address	P.O. BOX 682241	Address	2755 AMERICUS DRIVE
City-State-Zip:	FRANKLIN TN 37068	City-State-Zip:	THOMPSONS STATION TN 37179

Certificate of Status Desired: No

01/15/2020

FILED Jan 15, 2020 Secretary of State 4883977513CC

Date

Date