

A970000001151

BEED Investment Group
100 LAKEHORE DR. #1057
- North PALM BCH, FL 33408

Company

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JUN 21 PM 2:17
mtm
6/25

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

700002910857--1
-06/21/99--01126--020
*****35.00 *****35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Beed Investment Group, Ltd
Name of the limited partnership

2. 5-22-97
Date of filing/registration in Florida

3. A97000001151
Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

HRAWG
Name
2000 GLADES ROAD, STE 400
Address
BOCA RATON FL 33431
City, State and Zip

5. The name and address of the new registered agent and/or office:

Divine Blalock Martin & Sellari P.A.
Name C/o Kathleen Booth, CPA
560 Village Blvd, Ste 335
Florida street address (P.O. Box not acceptable)
West Palm Beach FL 33409
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

X [Signature]
Signature of General Partner

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

[Signature] (V.P. of Divine, Blalock, Martin & Sellari P.A.)
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00

99 JUN 21 PM 2:17

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS