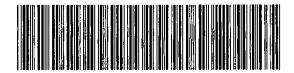
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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON OCT - 5 2010

**EXAMINER** 



Toll Free (800)899-8648 Voice (518)694-4414 Fax (518)432-0408

September 30, 2010

RE: SOUTH BEACH OCEAN PARCEL, LTD.

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

Enclosed please find a Statement of Change of Registred Office documents for the above together with our check to the Florida Department of State for \$35.00.

Please file on a routine basis, forwarding a stamped copy as appropriate evidence to the attention of the undersigned, via regular mail.

If there are any corrections or additional fees required to complete this filing, please KEEP these documents in your possession and telephone the undersigned toll free at 1-877-894-9049, ext 217.

Thank you.

Sincerely,

Dolores Burton Project Associate

**Enclosure** 

Our ID # Project ID SOUTH20304

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

	BEACH OCEA d Partnership or Limited		·····	
2. 4/1/1998		3.	A98000000813	
Date of filing/registration in Florida		Florida document number		
4. The name of the registered agen Department of State:	at and the registered offic	e address as s	hown on the records of the Florida	
	C T Corporation	System		
	Name			
	1200 South Pine Is	land Road	<u> </u>	
	Address			
Plantation FL 33324				
<del></del>	City, State and	Zip		
5. The name and Florida street add	lress of the new registere	d agent and/o	r office:	
U	nited Corporate Se	rvices, Ind	<b>&gt;.</b>	
	Name			
9200	South Dadeland E	Blvd. Suite	508	
	da street address (P.O			
	Miami	FL	33156	
	City State and	Zip		
6. Such change(s) is are effective.	when filed by the Florida	Department of	of State.	
Signature of General Partner				
I hereby accept the appointment as comply with the provisions of all st				

and I am familiar with an accept the filligations of my position as registered agent.

Filing Fee: \$35.00 Certified Copy (optional): \$52.50

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