

B15000000023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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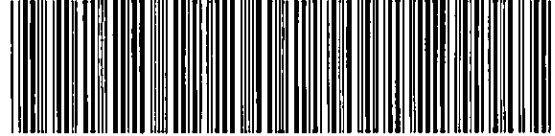
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

K. SALY  
JUL 18 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Paradise Beach Club Rentals LP  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** B15000000023

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Thomas J. Keable, Esq.

Contact Person

Lippes Mathias Wexler Friedman LLP

Firm/Company

50 Fountain Plaza, Suite 1700

Address

Buffalo, NY 14202

City, State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas J. Keable, Esq.

Name of Contact Person

at ( 716 )

853-5100

Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**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.

1. Paradise Beach Club Rentals LP  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 01/22/2015 3. B15000000023  
Date of filing/registration in Florida Florida document number

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

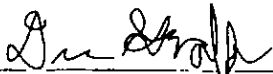
United Corporate Services, Inc.  
Name  
9200 South Dadeland Blvd., Suite 506  
Address  
Miami, FL 33156  
City, State and Zip

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

Drew Groff  
Name  
750 Ventura Dr.  
Florida street address (P.O. Box not acceptable)  
Satellite Beach FL 32937  
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

RENTALS IN FLORIDA 2 INC., General Partner

  
By: Drew Groff, President

*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.*

  
Signature of Registered Agent

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

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TALLAHASSEE, FLORIDA