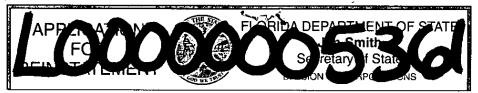
## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



1. DOCUMENT # L00000005361

Name and Mailing Address

2. New Mailing Address

0005775 01 FP 0.352 \*\*PRSRT T8 0 0615 34215-256307 BECKHAM PARTNERS, L.L.C. 12907 YACHT CLUB PLACE CORTEZ FL 34215-2563

FILED

02 NOV 13 AN 10: 42

SECRETARY OF STATE TALLAHASSEE, FLORIDA

4. State/Country of Formation

200008946652 11/13/02--01008--010 \*\*150.00



					FL '			
City, State, Zip					5. Date Organized or Qualified To Do Business in Florida 05/10/2000			
Principal Pl	ace of Business	3. New Princi	3. New Principal Place of Business Address			6. FEI Number		Applied For
	07 YACHT CLUB PLACE				65-1007636 ·		. [	Not Applicable
CORTEZ FL 34215-2563		City, State, Zip			CERTIFICATE OF STATUS DESIRED S5.00 Additional Fee required for a Certificate of Status			
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent				
BECKHAM, LEWIS S 12907 YACHT CLUB PLACE CORTEZ FL 34215-2563				Street Address (P.O. Box Number is Not Acceptable)				
			City			FL Zip	o Code	
Signature o Registered	Agent F	REGISTERED AGE	NT MUST SIGN	am familiar with a	and accept the oblig		.s. - <i>0Z</i>	
11. Names	s and Street Addresses of Each Managin	ng Member/Manage	er					
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager			City / State / Zip			
MGR	BECKHAM, JACQUELYN	12907 YACHT	12907 YACHT CLUB PLACE		. CORTEZFL 34215-2583			
MGR	BECKHAM, LEWIS S		12907 YACHT CLUB PLACE			CORTEZFL 34215-2563		
MGR	AGR ERICKSON, JENNIFER B		406 118TH AVE SE APT. 21			BELLEYUE WA 98004		
				DETERMINE	TATE	MENT C	de	
all fees as if m	that I am managing member/manager is reinstatement application the reason for owed by the limited liability company hade under oath.			mited liability com on this application	pany name satisfien n is true and accura	s the requirements of sec ate, and my signature sha	ction 608.40 all have the s	
Managing M	lember/Manager		ra.	Date //	6-02 DE	aytime Phone #		