## 10300033677

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## **COVER LETTER**

TO: Registration Section Division of Corporations								
SUBJECT: Breezy Paly Name of Lin	1S Properties UC ited Liability Company							
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.								
Please return all correspondence concerning this matter to the following:								
Juliette McCarthy Name of Person								
Breezy Palms Properties LLC Film/Company								
5150 DIXIE HWY NE.								
Palm Bay Fr 32905 City/State and Zip Code								
E-mail address: (to be used for future annual report potification)								
For further information concerning this matter, please call:								
Juliette McCarthy at (321) 724-1639  Name of Person Area Code & Daytime Telephone Number								
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314							
Enclosed is a check for the following amount:								
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy							

INHS18 (2/14)



October 3, 2017

JULIETTE MCCARTHY 5150 DIXIE HWY NE PALM BAY, FL 32905

SUBJECT: BREEZY PALMS PROPERTIES LLC

Ref. Number: L03000033677

We have received your document for BREEZY PALMS PROPERTIES LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a ALIEN BUSINESS ORGANIZATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

You can only list one person as the reigstered agent, not two.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 417A00020002



## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	lame of the limited liability company:	Palms	RV	Prop	erthe:	sllo
2.		Dreezy Palws RV Park Principal office address of limited liability company:	Mail	~	blms (		ack
		(Note: MUST BE STREET ADDRESS)  5150 DIXIE HUY NE	5150	DXI	e Hu	HAN	E
		Halm Bay, FL 32905	Palm	Ba	4, M	<u> 3</u> a	905
3.		09/05/2003 Date of filing/registration in Florida 4.	<u> Lo3</u>	ocument nu	<u> </u>	677	
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida	Dept, of State:				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS	<u></u>				
		Pompano Beach			<i>₩</i>	<b>⊳</b> a	
		, FL_ <u>33</u>	062			317 OC	:
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office ad	dress:		,		ur.
		5150 DIXIE HWY NE			· .	ن التا التا	-
		NEW Registered Office Address:			*z.*	(A) (4)	
		Palm Bay .FL 3	<del>2</del> 905				
the age wa	e cha ent v is/we	limited liability company is not organized under the laws of the nange or changes are made, the Florida street address of the regi will be identical. Or, in the case of a Florida limited liability covere authorized by an affirmative vote of the members of the limiteles of organization or the operating agreement of the limited	stered office ar ompany, it is he nited liability co	nd the businereby confi ompany or	ness office o irmed that th	of the regis ne change(	stered s)
		Patrick Mc Careful Car	^		CARTH d name of sign	Z	
II prothe to t	ierel ovisi obli merc lifiet	eby accept the appointment as registered agent and agree to acsions of all statutes relative to the proper and complete perform bligations of my position as registered agent as provided for in crety reflect a change in the segistered office address. I hereby cell in writing of this change	t in this capaci ance of my dut Chapter 605, F onfirm that the	ty. I furthe ies, and I c S. Or, if t limited lia	er agree to c un familiar his documen ubility comp	comply wit with and a at is being any has be	h the eccept filed en
Sig	gnatu	ture of Registered Agent					

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00