## L03000042115

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SECRETARY OF STATE

JUL 3 0 2013 J. BRYAN

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

Beach Access Realty, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patricia Lugo

Name of Person

Beach Access Realty, LLC

Firm/Company

1135 Pasadena Ave So, #302

Address

St. Petersburg, FL 33707-2856

City/State and Zip Code

beachaccess@ij.net

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

For further information concerning this matter, please call:

Patricia Lugo

at (727) 345-227

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314 STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

<b>T</b>	$\mathbf{O}$	
ARTICLES OF O	DRGANIZATION	<b>3 1</b>
	F	12 C 32
	. –	
Beach Access Realty, LLC		ords.) 2003 and assigned
(Name of the Limited Liability Comp	any as it now appears on our reco Liability Company)	ords.
(A Piones Ennice		
The Articles of Organization for this Limited Liability Compan	v were filed on October 31, 2	2003 and assigned
L 03000042115	<u></u>	500
Florida document number L03000042115		<b>Y</b>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
B A Realty, LLC		
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the desig	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
• • •		<del></del>
(Principal office address MUST BE A STREET ADDRESS)	<del></del>	
		<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
The state of the s		······································
	<del></del>	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		, enter the name of the new
registered agent and/or the new registered office address ne	<u> </u>	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida s	treet address
	, Flo	orida Zip Code
•	City	Lip Code

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
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If amending any other informat	tion, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
	·
<u> </u>	
<sub>d</sub> July 22	<u>2013</u>
•	
Sign Patricia Lugo	nature of a member or authorized representative of a member
	Typed or printed name of signee
•	Page 3 of 3

Filing Fee: \$25.00

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SECRETARSEE, FLORIDA