L05000113093

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
. (Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		į





400106266004

08/20/07--01009--010 **25.00

TAUG 20 PM 12: 58
SECNLIARY OF STATE

RA Chas



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 22, 2007

COASTAL EQUITY PARTNERS, LLC 350 CAMINO GARDENS BLVD. BOCA RATON, FL 33432 US

SUBJECT: COASTAL EQUITY PARTNERS, LLC

Ref. Number: L05000113093

SUBJECT: COASTAL EQUITY PARTNERS, LLC

Document #: L05000113093 .

Our records indicate the registered agent for the above named limited liability company resigned on June 7, 2007 and that the limited liability company currently does not have a registered agent designated.

Chapter 608, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a limited liability company for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named limited liability company 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-6050.

Carol Mustain Document Specialist Division of Corporations

Letter Number: 707A00041350

in the entities of policy to gree for the enclosion of a confiction of the following for the following following for the following for the following for the following following for the following for the following following for the following following for the following following

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: Coastal Equity Partners, LLC	
	n
2. The mailing address of the limited liability company is: 350 Camino Cardens Blvd,#102	_
Bora Raton, FL 33432.	
11/23/2005 405 113093	
3. Date of filing/registration in Florida . 4. Document number . 9	
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:	
20 LE	
Nome	
Address On The D	
Address ORDA 2: 58	
City, State and Zip	
6. The name and address of the new registered agent and/or office:	
PETER H. COLLINS	
PETER H. COLLINS Name 350 CAMINO GARDENS BLVD. SUITE 102	
Florida street address (P.O. Box NOT acceptable)	
BOCA RATON, FL 33432	
City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.	
Flat. C.	
(Signature of a member or authorized representative of a member)	
(Printed or typed name of signee)	
(Printed or typed name of signee)	
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 statules 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.	
(Signature of Registered Agent)	

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