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(Requestor's Name)			
(Address)			
(Address)			
(Cit	ty/State/Zip/Phone #)	_	
PICK-UP	WAIT MAIL	_	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates of Status	_	
Special Instructions to	Filing Officer:	7	
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05/14/07--01037--014 **25.00

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	ECT: NORTH BEA			
		(Name of Lin	nited Liability Company)	
Dear S	Sir or Madam:			
The e	nclosed Registered Ag	gent/Registered Of	fice Change and fee(s) are submitted for filing.	
Please	return all correspond	lence concerning th	is matter to the following:	
GARO	GES PURTEE	na of Payron)		
	(Nai	me of Person)		
	(Fin	n/Company)		07 MAY 14
0973 A				11 1
<u> 20,72 (</u>	GULF BOULEVARD (Add	dress)		AM 11: 08
<u>TREA</u>	SURE ISLAND, FLO (City	ORIDA 33706 //State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	1: 08
For fu	rther information con	cerning this matter.	, please call:	
<u>GARC</u>	GES PURTEE (Name of Person)	at ((Area Code & Daytime Telephone Number)	-
	STREET/COURING Registration Section		MAILING ADDRESS: Registration Section	
Division of Corporations		ntions	Division of Corporations	
	Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314			
	Tallahassee, Florida		Tanianassee, Pionua 32314	
	Enclosed is a check	for the following a	amount:	
A comment	∑ \$25.00 Filing 1	Fee	\$55 Filing Fee & Certified Copy	

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: NORTH BEAL, LLC	
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2. The mailing address of the limited liability company is: 9872 Gulf Blyd., Treasure Island, FL 33706

01/19/2006

L06000006918

3. Date of filing/registration in Florida

4. Document number

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

ROGER A. LARSON

Name

911 CHESTNUT STREET

Address

CLEARWATER, FLORIDA 33756

City, State and Zip

6. The name and address of the new registered agent and/or office:

GARGES PURTEE

Name

9872 GULF BOULEVARD

Florida street address (P.O. Box NOT acceptable)

TREASURE ISLAND, FLORIDA 33706

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.

(Signature of a member of authorized representative of a member)

GARGES PURTEE

(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 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.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00 07 MAY 14 AM 11: 08

INHS18 (8/05)



Florida Limited Liability

NORTH BEAL, LLC

PRINCIPAL ADDRESS 9872 GULF BOULEVARD TREASURE ISLAND FL 33706

MAILING ADDRESS 9872 GULF BOULEVARD TREASURE ISLAND FL 33706

Document Number L06000006918 FEI Number 204178035

Date Filed 01/19/2006

State FL Status ACTIVE Effective Date NONE

Total Contribution 0.00

Registered Agent

Name & Address

LARSON, ROGER A
911 CHESTNUT STREET
CLEARWATER EL 33756

Manager/Member Detail

Name & Address	Title
PURTEE, GARGES 9872 GULF BLVD	МЕМВ
TREASURE ISL AND FL 33706	

Annual Reports

Report Year	Filed Date
	<u> </u>

SECRETARY OF STATE

THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT

Corporations Inquiry

Corporations Help

DIVISION OF CORPORATIONS