

LOG 0000045947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

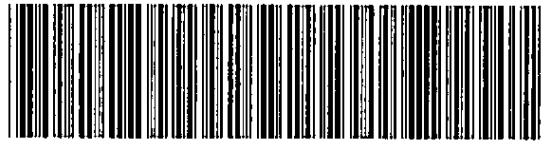
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900381070189

RA&RO change

02/09/22--01013--011 ++35.00

FILED
2022 MAR -7 AM 10:37
CLERK OF COURT
JANESVILLE, WI

A. RAMSEY
MAR 08 2022

*00789, 00524, 00671

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Beach Realty and Associates LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

1. Douglas Marshall
Name of Person

Firm/Company

213 Gnarled Oaks Drive
Address

Ponte Vedra Beach, FL 32082
City/State and Zip Code

dmarshall@beachrealtyco.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas Marshall at (904) 612 - 4360
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 MAR -7 PM 12:12

SECRETARY OF STATE
TALLAHASSEE, FL

February 17, 2022

IRA D. MARSHALL
BEACH REALTY & ASSOCIATES LLC
830-13 HWY A1A N #195
PONTE VEDRA BEACH, FL 32082 US

SUBJECT: BEACH REALTY & ASSOCIATES, LLC
Ref. Number: L06000045947

We have received your document for BEACH REALTY & ASSOCIATES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form that you submitted is incorrect. It is for a limited liability company and your entity is an LLC. I have enclosed the correct form.

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) 245-6823.

Annette Ramsey
OPS

Letter Number: 622A00004013

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. Name of the limited liability company: Beach Realty & Associates LLC

2. (a) 830-13 Highway A1A N # 195
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Ponte Vedra Beach, FL 32082

(b) 830-13 Hwy A1A N # 195
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

Ponte Vedra Beach, FL 32082

3. 5/3/2006
Date of filing/registration in Florida

4. LO6000045947
Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

James A Nolan
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

4114 Herschel Street, Suite 105
Jacksonville, FL 32210

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

I Douglas Marshall
NEW Registered Office Address:

213 Gnarled Oaks Drive
Ponte Vedra Beach, FL 32082

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]
Signature of a member or authorized representative of a member

Ira D. Douglas Marshall
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 605, 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]
Signature of Registered Agent

FILED
2022 MAR -7 AM 10:37
CLERK OF STATE
TALLAHASSEE, FL 32304