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COVER LETTER

	Registration Section Division of Corporations							
SUBJEC	1800 BECKS LAKE, L.L.C.							
OODOL	1	Name of Limited Liability Company						
Dear Sir	or Madam:							
The encl	osed Registered Agent/Registered	Office Change an	d fee(s) are submitted for filing.					
Please re	nurn all correspondence concerning	g this matter to th	e following:					
L. K. HO	RTON-BROWN							
	Name of Person							
	Firm/Company							
1400 E S	TRONG ST							
	Address							
PENSAC	OLA, FL 32501							
	City/State and Zip Cod	le						
TED.KA	THY1700@GMAIL.COM							
E-1	nail address: (to be used for future	annual report not	ification)					
For furth	ner information concerning this mat	ter, please call:						
WARRE	N T BROWN	850 at (982-1907					
	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					
1	Enclosed is a check for the follow	ing amount:						
i	■ \$25 Filing Fee		\$55 Filing Fee & Certified Copy					
INHS18 (2/14)							

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. i	Na	me of the limited liability company: $\frac{1800}{2}$) BECKS LAK	ն, ե.ե ———	.C.					
2. (a	١.	1400 E STRONG ST		(b)	1400 E ST	RONG ST			
<u>د</u> . (د	٠, .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)					Mailing address of limited (Note: MAY BE POST		-	
		PENSACOLA, FL 32501		-	-		OLA, FL 32501			
		05/18/2006		_		060000518		-		
3.		Date of filing/registration in Flor	rida	4.			Document number			
5. (L. K. HORTON-BROWN								
5. (a)	a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1700 OSCEOLA BLVD			- e: -	.,	2			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					2020 SEP			
		PENSACOLA	. FL ³	32503			VHASSE	.:	28	Frances C
(b)	o) _.	Enter name of NEW Registered Agent and/or NEW Registered Office			ddr	ess:	ر النا - النا	STATE	P# 12: 11	C
		NEW Registered Office Address:				•	-			
		1400 E STRONG ST.				- <u>-</u> -	-			
		PENSACOLA	, FL	2501			-			
chan agen was/	ige it w 'we	mited liability company is not organized or changes are made, the Florida street actill be identical. Or, in the case of a Florida re authorized by an affirmative vote of the cles of organization or the operating agree	ldress of the r da limited liab e members of	egiste oility c the lii mited	red om nit lia	office and pany, it is ed liability	d the business office is hereby confirmed the company or as other pany.	of that at t	ne regi he chai	stered nge(s)
Sig	nat	ure of a member or authorized representative of a r	nember				Printed or typed name o	sig	nec	
prov the o to no	isu bli ere	ny accept the appointment as registered as one of all statutes relative to the proper as ignitions of my position as registered agently reflect a change in the registered office is writing of this change. The Hon-Brown Common of the content of the content of the change is the content of the content o	gent and agree nd complete p t as provided address, I he	e to ac erforn for in ereby c	rt in Ch Con	this capa ce of my a apter 605, firm that t	acity. I further agree luties, and I am famid , F.S. Or, if this doct the limited liability co	to c liar inte mip	comply with a nt is be any ha	with the nd accept ging filed is been