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(Requestor's Name)	
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EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: Beach Group Rentals, LLC		
(Name of L	Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	is matter to the following:	
Janet Seaton		
(Name of Person)		
Beach Group Rentals, LLC (Firm/Company)		2009 SEC
PO Box 10210	AHASS	2009 JAN 13 AHII
(Address)		S A
Fort Smith AR 72917		ANIO: 56
(City/State and Zip Code)	7	
For further information concerning this matter, p	please call:	
Janet Seaton at	t (479) 783-0209	
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	·
Enclosed is a check for the following a	amount:	
☐ \$25 Filing Fee		

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. Name of the limit	ted liability company: Beach G	roup Rentals, LLC	_ 0
	ce address of limited liability comp ST BE STREET ADDRESS)	pany: 5871 Gulf of Mexico Drive	=
(Note: Mei)	Longboat Key Florida 34228	
(b) Mailing addr (Note: MA)	ess of limited liability company: Y BE POST OFFICE BOX)	PO Box 10210 Fort Smith AR 72917	_
09/25/2006		<u>L06000093762</u>	
3. Date of filing/reg	istration in Florida	4. Document number	
5. (a) Registered A	gent and Registered Office shown	on the records of the Florida Dept. of State:	#
Registered A	gent:	Charles Palmer	
Registered O	ffice Address:	4134 Gulf of Mexico Drive	<u> </u>
(b) Enter name o		NEW Registered Office address: Charles Palmer	E
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		5871 Gulf of Mexico Drive	_
· · · · · · · · · · · · · · · · · · ·		Longboat Key <u>■</u> ,FL 34228	
that after the change office of the register hereby confirmed th liability company or limited liability com	or changes are made, the Florida sed agent will be identical. Or, in that the change(s) was/were authorizes otherwise provided in the articles.	the laws of the State of Florida, it is hereby confitreet address of the registered office and the bus he case of a Florida limited liability company, it ed by an affirmative vote of the members of the es of organization or the operating agreement of	iness is limited
Charles Palmer (Printed or typed name of	signee)		
I hereby accept the comply with the provam familiar with and F.S. On if this docu confirm that the limit	appointment as registered agent are issions of all statutes relative to the lacept the obligations of my positions to the health of the positions of the position of the property reflected liability company has been not	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, tion as registered agent as provided for in Chapt to a change in the registered office address, I her ified in writing of this change.	o , and I ter 608, eby
(Signature of Registered A	gent)		

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