

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SECRETARY OF STATE
DIVISION OF CORPORATION

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DOCUMENT # L07000102840

1. Entity Name

BEACH WALKERS, LLC.



DO NOT WRITE IN THIS SPACE

400182688194
06/28/10--01031--027 **138.75

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2217 LAS VEGAS TRAIL

Suite, Apt. #, etc.

3. Mailing Address
2217 LAS VEGAS TRAIL

Suite, Apt. #, etc.

City & State
NAVARRE, FL

City & State
NAVARRE, FL

4. FEI Number 22-3970372

Applied For
Not Applicable

Zip
32566

Country

Zip
32566

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name Spiegel & Utrera, P.A.

Street Address (P.O. Box Number is Not Acceptable)

1840 SW 22nd Street, 4th Floor

City Miami

FL

Zip Code
33145

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IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE

BK

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
ELLIS E. NICHOLS, JR.
2217 Las Vegas Trail, Navarre, Florida 32566

TITLE
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

ELLIS E. NICHOLS, JR.

ELLIS E. NICHOLS, JR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

June 16, 2010
Date Daytime Phone #

CR2E083B (12/02)