L07000112729

(F	Requestor's Name)	
(A	Address)	
(A	Address)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(E	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	

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L. SELLERS

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EXAMINER

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SECRETARY OF STATE

11 MAR 30 AM 11: 22

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT:	10221 BEACH HOLDINGS, LLC Name of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/R	egistered Office Change and fee(s) are submitted for filing.	
Please return all correspondence	concerning this matter to the following:	
ROSELY W. F	KANNER	
Name of Perso	vn	
10221 BEACH HOLDINGS, LLC		
Firm/Company	<i>(</i>	
1331 HERON PO	INT ROAD	
Address		
JACKSONVILLE, FL City/State and Zip		
Chy/State and Zip	Code	
rosely.kanner@e E-mail address: (to be used for future	gmail.com annual report notification)	
For further information concerning	ng this matter, please call:	
Name of Person	at (904) 260-5020 Area Code & Daytime Telephone Number	
STREET/COURIER ADD		
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circl Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for t	he following amount:	
 √ \$25 Filing 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. Name of the limited liability company:	10221 BEACH HOLDINGS, LLC
2. (a) Principal office address of limited liability co	mpany: 1331 HERON POINT ROAD
(Note: MUST BE STREET ADDRESS)	1331 HERON POINT ROAD JACKSONVILLE, FLORIDA 32223
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	1331 HERON POINT ROAD JACKSONVILLE, FLORIDA 32223
11/07/2007	L07000112729
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State:
Registered Agent:	WIENER, WILLIAM, CPA
Registered Office Address:	8286 WESTERN WAY CIRCLE
	SUITE C-2 JACKSONVILLE, FLORIDA 32256 US
(b) Enter name of <u>NEW Registered Agent</u> and/o	
NEW Registered Agent:	ROSELY W. KANNER
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1331 HERON POINT ROAD
1	JACKSONVILLE ,FL32223
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the charge of the members of the limited liability company or as or the operating agreement of the limited liability considered agreement of the limited liability considered agent with a member of a member of a member of a member of signee. ROSELY W. KANNER Printed or typed name of signee I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filled address, I hereby confirm that the limited liability considered of Registered Agent.	the Florida street address of the registered office e identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote of otherwise provided in the articles of organization ampany.
Signature of Registered Agent	

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