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D. BRUCE

JUN 8 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: <u>Gulf & Bay Club Re</u> Name of Limited Liability Co	alty, LLC	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and for	ee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the fo	ollowing:	
Stephanie Kitsemble Name of Person		
Gulf & Bay Club Realty, LLC	,	
5730 Midnight Pass Rd	Tall	
Sarasota FL 34242 City/State and Zip Code	JUN-7	
Sales @ 9 wfandbay club - com E-mail address: (to be used for future annual report notification)	OF STATE	
For further information concerning this matter, please call:		
Stephanie Kitsemble at (941) 3 Name of Person Area C	349.0724 ode & Daytime Telephone Number	
Registration Section Registration Division of Corporations Division of Clifton Building P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee \$55 Fili	ng Fee & Certified Copy	

INHS18 (5/08)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.50 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited r to change its registered office or registered —
1. Name of the limited liability company: Guff &	Bay Club Realty, LLC
2. (a) Principal office address of limited liability company	
(Note: MUST BE STREET ADDRESS)	5730 Midnight Pass Rd Sarasota FL 34242
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	Same as above
April 29, 2008	L08000043016
3 3 4	4. Document number
5. (a) Registered Agent and Registered Office shown on	<u>.</u>
Registered Agent:	S. Dudley Carson
Registered Office Address:	5730 Midnight Pass Rd Savasota FL 34242
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Stephanie Kitsemble
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5730 Midnight Pass Rd Sarasota FL 34242
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company Signature of a member or authorized representative of a member DEE SLAY, SOAED MEMBER. Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the preand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, thereby confirm that the limited liability company	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization

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