

LO9 0000 44 782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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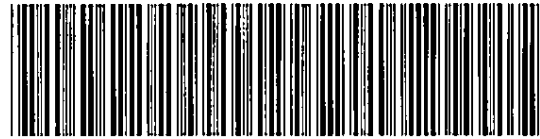
(Business Entity Name)

(Document Number)

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C. GOLDEN

FEB 14 2020

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PALMERS BAYSIDE ESCAPE  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALBERT M PALMER  
Name of Person

PALMERS BAYSIDE ESCAPE  
Firm/Company

77 LAKE SHORE DRIVE  
Address

KEY LARGO FL 33037  
City/State and Zip Code

PDI BUILDER@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALBERT M PALMER at (305) 389 2189  
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

Enclosed is a check for the 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 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. Name of the limited liability company: PALMER'S BAYSIDE ESCAPE, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

77 LAKE SHORE DRIVE  
KEY LARGO, FL. 33037

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

PO BOX #370501  
KEY LARGO, FL. 33037

05-08-2009

3. Date of filing/registration in Florida

LO 9000044782

4. Document number

5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

ALBERT M PALMER

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

15391 SW 210 ST  
MIAMI, FL. 33187

(b) \_\_\_\_\_  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Office Address:**

77 LAKE SHORE DRIVE  
KEY LARGO, FL. 33037

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Albert M Palmer

Signature of a member or authorized representative of a member

ALBERT M PALMER

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Albert M Palmer

Signature of Registered Agent

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