Division of Corporations **Electronic Filing Cover Sheet**

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H130000271543ABCX

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number: I20070000020

Phone : (813)435-3176

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Deni 7	Address:			
Emall	ACCIESS:			

LLC REGISTERED AGENT CHANGE **BEACH GATEWAY, LLC**

Certificate of Status	0	
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C. LEWIS

FEB - 5 2013

EXAMINER

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H1300000341543

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

 \tilde{P} ursuant 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. Na	ame of the limited liability company: BEACH GATEWAY	, LLC		
2 (~	D ' ' 1 00 11 00 11 11 11 11 11 11 11 11 11 1			프
2. (a)	 Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS) 	SUITE 318		SE
	(NOIE: MUST BE STREET ADDRESS)	MIAMI FL 33183 US	- -	<u>0</u> %
			· [8	0 T T
(b) Mailing address of limited liability company:	14250 SW 62 ST	1	TA-
	(Note: MAY BE POST OFFICE BOX)	SUITE 319	<u> </u>	
		MIAMI FL 33183 US	- 2	<u>سي دو.</u> د دورو
				25
02/23/2	011	L11000022645		7
3. D	ate of filing/registration in Florida	4. Document number	9	
5. (2	 Registered Agent and Registered Office shown (Registered Agent: 	on the records of the Florida D		e:
	Registered Agent.			
	Registered Office Address:	12000 NORTH DALE MABRY HWY		
		SUITE 110		
	•	TAMPA, FLORIDA 33618		
`	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	THE LAW OFFICES OF NICK SPRADL		
	NEW Registered Office Address:	18952 NORTH DALE MABRY HWY		
	(MUST BE FLORIDA STREET ADDRESS)	SUITE 102		
		LUTZ	,FL_336	18
confi and t	e limited liability company is not organized under the rmed that after the change or changes are made, the business office of the registered agent will be id lity company, it is hereby confirmed that the change numbers of the limited liability company or as other perating agreement of the limited liability company or the limited liability company or the limited liability company of member or authorized representative of a member	e Florida street address of the rentical. Or, in the case of a Flecs) was/were authorized by an	registered o orida limito affirmativ	office ed e vote of
NICKO	LAS J. SPRADLIN AUTHORIZED REPRESENTATIVE			
Printe	d or typed name of signee			
I her compand Chap addr	reby accept the appointment as registered agent an oly with the provisions of all statutes relative to the lam familiar with and accept the obligations of my oter 608, F.S. Or, if this document is being filed to ess, I hereby confirm that the limited liability comp	d agree to act in this capacity, proper and complete perform position as registered agent a merely reflect a change in the any has been notified in writh	I further ance of my is provided registered ag of this c	agree to duties, for in office hänge.
Side	ture of Registered Agent			

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

INHS18 (05/08)