2110000047766

(Requestor's Name)			
(Address)			
(Ad	ldress)		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate:	s of Status	
Special Instructions to Filing Officer:			
MAR - 7 2013			
A. LUNT			





900244612219

103/04/13--01025--014 **25.00

2013 HAR 4- RH 11: 40

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ		IES GRO			
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered	Office Change a	nd fee(s) are submitte	d for filing.	
Please	return all correspondence concerning	g this matter to tl	ne following:		
Aar	ron E. Ruswick				
Hu	ck Bouma PC			na na na	2013 8
	Firn/Company		•	ii	201
175	55 S. Naperville Rd;	#200		; ;	
-	Address			t de la companya de l	01:H
Wh	eaton, IL 60189			`. `	Ö
	City/State and Zip Code				
	swick@huckbouma.			v	
	rther information concerning this mat				
Aar	on E. Ruswick	_{at} 630	, 221-1755		
	Name of Person	Ai	rea Code & Daytime Telepho	ne Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regis Divis P.O. 1	tration Section ion of Corporations Box 6327 hassee, Florida 32314		
	Enclosed is a check for the following	ing amount:			
■ \$25 Filing Fee		Filing Fee & Certified	d 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 liabili	ity company: FLIP PROPERTIE	ES GROUP, LLC	
2. (a) Principal office addres	e of limited lightlity come	22721 6662 Estero Blvd #108	
(Note: MUST BE ST		Fort Myers Beach, FL 33931	
(b) Mailing address of lim	nited liability company:	1801 Estero Blvd	
(Note: MAY BE PO		Fort Myers Beach, FL 33931	
April 22, 2011		L11000047766	
3. Date of filing/registration i	in Florida	4. Document number	
5. (a) Registered Agent and	Registered Office shown	on the records of the Florida l	Dept, of State
Registered Agent:		Meriboth Griffin	
Registered Office Add	lress:		1
3		1015 8th Avenue North	
		Naples, FL 34102	2.0
			4,
(b) Enter name of NEW R	legistered Agent and/or l	NEW Registered Office add	ress:
<u>NEW</u> Registered Ager	nt:	Tonya Reed	
NEW Registered Office	ce Address:	Sunny Beach Vacation Rentals & Sales	
	A STREET ADDRESS)	1801 Estero Blvd	
		Ft. Myers Beach	FL 33931
If the limited liability compan confirmed that after the chang and the business office of the liability company, it is hereby the members of the limited lia the operating agreement of the Signature of a member or authorized rep	se or changes are made, the registered agent will be id confirmed that the changulative company or as other limited liability company.	e Florida street address of the lentical. Or, in the case of a F e(s) was/were authorized by a rwise provided in the articles	registered office lorida limited n affirmative vote of
TIMOTHY H. RYAN, Manager			
Printed or typed name of signee		_	
comply with the provisions of and I am familiar with and ac Chapter 608, F.S. Or, if this c address, I hereby confirm that	all statutes relative to the cept the obligations of my document is being filed to t the limited liability comp	nd agree to act in this capacity e proper and complete perforn position as registered agent merely reflect a change in the pany has been notified in writi). I further agree to nance of my duties, as provided for in eregistered office ing of this change.
Signature of Registered Agent	<u></u>		

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

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: FLIP PROPERTIES O	GROUP, LLC	
(a) Deimainal office address of limited lightlife assumes	act 6060 Estoro Bhat #100	
2. (a) Principal office address of limited liability compar		·
(Note: MUST BE STREET ADDRESS)	Fort Myers Beach, FL 33931	
All and the state of the state		
(b) Mailing address of limited liability company:	1801 Estero Bivd	
(Note: MAY BE POST OFFICE BOX)	Fort Myers Beach, FL 33931	4 4-
•		
April 22, 2011	L11000047766	****
3. Date of filing/registration in Florida	4. Document number	3 5
J. Daw of himprogrammed in thornta	4. Boothon numer	5
5 () 5 11 1 15 10 10 10	a a ea . 131 '1 15	San Contract
5. (a) Registered Agent and Registered Office shown or	the records of the Florida I.	ept, of State:
Registered Agent:	Meribeth Griffin	
Registered Office Address:	·	
	1015 8th Avenue North	
	Naples, FL 34102	
NEW Registered Agent:	Топуа Reed	
NEW Registered Office Address:	Sunny Beach Vacation Rentals & Sales	;
(MUST BE FLORIDA STREET ADDRESS)	1801 Estero Blvd	
1110010011101010110111011110111101111101111	Ft. Myers Beach	FL 33931
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change the members of the limited liability company or as otherwise operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the a ntical. Or, in the case of a Fl s) was/were authorized by an	registered office lorida limited 1 affirmative vote of
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability company.	agree to act in this capacity roper and complete perform osition as registered agent a erely reflect a change in the ny has been notified in writi	. I further agree to ance of my duties, is provided for in registered office ng of this change.
Signature of Registered Agent		

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