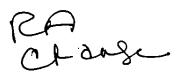
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COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations						
SUBJ	Coastal Bay Investments, LL	Coastal Bay Investments, LLC					
		Name of Limited Liability Company					
Dear S	Sir or Madam:						
The er	nclosed Registered Agent/Registered Offic	e Change and f	fee(s) are submitted for filing.				
Please	return all correspondence concerning this	s matter to the f	following:				
Kimb	erly Stitt						
	Name of Person		_				
Coas	stal Bay Investments, LLC						
	Firm/Company		***				
P.O.	Box 27955						
	Address		_				
Pana	ma City Beach, Florida 32411						
	City/State and Zip Code						
coast	talbayinvest@live.com						
E	3-mail address: (to be used for future annu	al report notific	cation)				
For fu	rther information concerning this matter, p	olease call:					
Mark		_ at (625-1919				
	Name of Person		Area Code & Daytime Telephone Number				
Registration SectionRegDivision of CorporationsDivClifton BuildingP.O		MAILING ADDRESS: Registration Section Division of Corporations C.O. Box 6327 Callahassee, Florida 32314					
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.	Na	me of the limited liability company: Coastal Bay In			-	· · · · · · · · · · · · · · · · · · ·
2.	(a)	185 Marlin Circle	(b) P.O. Box 27955			
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- (.~/_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Panama City Beach		F	Panama	a City Beach
		Florida, 32408		F	lorida :	32411
		6/13/2011		Ľ	10000	68583
3.		Date of filing/registration in Florida	4.	_		Document number
5.	(a)	Mark F. Stitt				
٠.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State				- e:
		185 Marlin Circle				
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRES	SS)		1
			······································			FILED RANGE
		Panama City Beach	32408	3		一
						PR-1 THE STATE
(ָ (ט)	Kimberly S. Stitt			- ROTE -	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :) **
		185 Marlin Circle				
		NEW Registered Office Address:	···			-
					,	
		Panama City Beach	32408	3		3
the age was the	chai nt w s/we artic	mited liability company is not organized under the laws nge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization of the operating agreement of the li	he reg pility c the lir mited	ister comp mite liab	ed office pany, it is d liabilit	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in inpany.
		ure of a member or authorized representative of a member	. 4	_ a *.	41-1	Printed or typed name of signee
pro the to n not	visio obli nere ified	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to ac erforn for in ereby c	ct in nand Cha conf	this cap se of my l spter 605 irm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been
Sig	natur	e of Registered Agent				