# L11000 083 042

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SECRETARY OF STATE

TALLAHASSES, FLORIDA

#### **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: BEAY COMP, LLC Name of Limited Liability Company					
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Thomas H. Campur. Name of Person					
Firm/Company					
2445 Pimlica Lane					
Melbourne FL 32934  City/State and Zip Code					
E-mail address (to be used for future annual report notification)					
For further information concerning this matter, please call;					
Thomas Camp Jr. at (3a1) 298-7561  Name of Person Area Code Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) \$\Bigcup \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)					

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Compar	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number <u>LINOOOSSOAS</u> .  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liabi	were filed on <u>JUly 19,2011</u> and assigned	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "L.L.C." or the abbreviation "L.L.C."	<del></del>
Enter new principal offices address, if applicable:	2445 Pimlico Ln	···
(Principal office address MUST BE A STREET ADDRESS)	melbourne, FL 32934	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2445 Pimlico Ln Melbourne, FL 32934	<u>-</u>
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		<u>new</u>
Name of New Registered Agent:	ASS S	
New Registered Office Address:	Enter Florida street address	
	Florida	
	City 979 Ap Code	
New Registered Agent's Signature, if changing Registered Agent:		

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.

If Changing Registered Agent, Signature of New Registered Agent

### or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
mgr	Thomas H Camp	4200 Eldorado Way	
		Melbourne, Fl 32934	Remove
			Change
<i>mdr</i>	Thomas H Camp Jr.	2445 Pimlico Ln	Add
J		Melbourne, Fl 32934	П Ветюче
			Change
			Add
		<del></del>	Remove
		···	Change
			Add
			□ Remove
			□ Change
	<del></del>		🗆 Add
			Remove
		<del> </del>	Clunge
			□ Remove
			Change

E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t document's effective date on the Department of State's records.	(3)(b) the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.	,
Dated November . 2019.	
Thomas H Camp  Typed or printed tame of signee	

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Filing Fee: \$25.00