L11000136211

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SECRETARY OF STATE
TAKE AHASSEF, FLORIDA

J. BRYAN

JAN - 4 2012

EXAMINER

Je Brid

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJECT: Bikini Weenies, LLC Name of Limited Liability Company			
Dear	Sir or Madam:	•	
The e	nclosed Registered Agent/Registered Off	Tice Change and fee(s) are submitted for filing.	
Please	e return all correspondence concerning the	nis matter to the following:	
	Randy C. Fox Name of Person	ZOIL DE TALLA	
	Firm/Company	ETARY ETARY	
	2500 Main Street, Slip C-35 Address	2011 DEC 30 PM 3: 31 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
	Ft. Myers Beach, FL 33931 City/State and Zip Code		
	littleshellisland@aol.com -mail address: (to be used for future annual report notif		
i or iu	Dandy C. Fay	at (239) 682-6664	
- <u> </u>	Name of Person	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	Enclosed is a check for the following a	amount:	
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

1. 3.3

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.

Name of the limited liability company:	Bikini Weenies, LLC
2. (a) Principal office address of limited liability company	y: 2500 Main Street, Slip C-35
(<u>Note: MUST BE STREET ADDRESS</u>)	Ft. Myers Beach, FL 33931
(b) Mailing address of limited liability company:	2500 Main Street, Slip C-35
(Note: MAY BE POST OFFICE BOX)	Ft. Myers Beach, FL 33931
December 2, 2011	L11000136211
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Bork of State:
Registered Agent:	Randy C. Fox
Registered Office Address:	4706 SE 9th Place Cape Coral, FL 33904
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address: Randy C. Fox
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2500 Main Street, Slip C-35
	Ft. Myers Beach ,FL33931
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
Signature of a member or authorized representative of a member	
Printed or typed name of signee	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, Thereby confirm that the limited liability compan	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.
Signature of Registered Agent	

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