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TALLAUSSEE, FLORIDA

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#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: SUNBEACH HOMES LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

### MONIQUE HERZSTEIN

Name of Person

## MCH CONSULTING USA

Firm/Company

#### 3131 NE 188TH STREET SUITE 2301

Address

# AVENTURA, FL 33180

City/State and Zip Code

# monique.mchconsulting@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MONIQUE HERZSTEIN at (786) 521-3885

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 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 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.

				200	~	
1.	Nar	ne of the limited liability company: SUNBEACH HOMES LL	С		<u> </u>	
	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	3054 RED MANGROVE LINE #305-3  DANIA BEACH, FL 33312	経過	<u>J</u> Щ_ 3	<u></u>
	<b>41.</b> \			調		
(b)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	7500 NW 25TH STREET SUITE 257 MAMI, FL 33122		<del>‡.</del>	
03/	15/201	3	L13000039401	J. Mari	<del>-</del>	
			4. Document number			<del>.</del>
5.	(a)	Registered Agent and Registered Office shown on the	•	i. of Sta	ıte:	
		Registered Agent:	BENDAVID ROBERT			
		Registered Office Address:	4928 WINDWARD WAY FT LAUDERDALE,FL 33312			
		Enter name of NEW Registered Agent and/or NEW  NEW Registered Agent:  NEW Registered Office Address:	MONIQUE HERZSTEIN 3131 NE 188TH STREET SUITE 2301			
		(MUST BE FLORIDA STREET ADDRESS)	AVENTURA	,FL 331	180	
and lia	nfirn d the bilit me	imited liability company is not organized under the land that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the reg cal. Or, in the case of a Floric was/were authorized by an af	istered da limit firmativ	office ted ve vo	te of
Sig	nature	e of a member or authorized representative of a member	-			
_		ELDE RICHARD	_			
I h cor an Ch ad	nerei mply d I a apte dres	or typed name of signec by accept the appointment as registered agent and as with the provisions of all statutes relative to the pro tim familiar with and accept the obligations of my pos er 608, F.S. Or, if this document is being filed to mer s, I hereby confirm that the limited liability company	gree to act in this capacity. I per and complete performand ition as registered agent as p ely reflect a change in the reg has been notified in writing o	further ve of my rovided gistered of this c	agre duti l for i l offic hång	e to es, in ce ee.
- 519	gnatur	e of Registered Agent				

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25,00