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HAN 24 20:A J. HARRIS

COVER LETTER

Division of Corporations						
Palm Bay Club, LLC SUBJECT:						
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 r	matter to the following:					
Tom Kraemer						
Name of Person						
Palm Bay Club, LLC						
Firm/Company						
4307 W. Beachway Drive						
Address						
Tampa, FL 33609						
City/State and Zip Code						
tckraemer@aol.com						
E-mail address: (to be used for future annua	I report notification)					
For further information concerning this matter, pl	ease call:					
Tom Kraemer	813 244-9090 at ()					
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 ar	mount:					
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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.

. (a)	4307 W. Beachway Dr. Tampa, FL 3360)9 (H	Same	
(4)	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)			lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	March 13, 2018		L1400004	7829
	Date of filing/registration in Florida	4.		Document number
(a)	Tom Kraemer			
	Registered Agent and Registered Office shown on the rect 4821 N. Manhattan Avenue, Tampa, Ft		a Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STE		<u>2)</u>	22 22 24 A
	Tampa	33614		
(b)	Tom Kraemer			Service Control of the Control of th
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Reg</u>	istered Office ad	ldress:	
	4307 W. Beachway Drive			08.05 % %
	NEW Registered Office Address:			
	Tampa	_, 33609		
the l	mited liability company is not organized under t	, f`L		rida it is hereby confirmed that after
ne cha gent v /as/we	nge or changes are made, the Florida street addrivill be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the memories of organization or the operating agreement of	ess of the regi ited liability cobers of the lin	stered office ompany, it is nited liability	and the business office of the registere hereby confirmed that the change(s) company or as otherwise provided in
	ure of a member of authorized representative of a member	Toi	m Kraemer	
				Printed or typed name of signee
herei rovisi ie obl	by accept the appointment as registered agent ar ons of all statutes relative to the proper and con igations of my position as registered agent as pr tly reflect a change in the registered office addro	nd agree to ac nplete perform rovided for in ess. I hereby o	t in this capa ance of my a Chapter 605, confirm that t	icity. I further agree to comply with the luties, and I am familiar with and accep F.S. Or, if this document is being filed the limited liability company has been
oujte	Tin writing of this change. Tom Known Te of Registered Agent	eno, i nerenji e		ne immed itaminy company has been

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