## L14CCC 30436

(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
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ALBRITTON

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 343257/ 7794849

 $O \subset$ 

COST LIMIT : \$ 25.00

ORDER DATE: December 21, 2021

AUTHORIZATION

ORDER TIME : 2:01 PM

ORDER NO. : 343257-005

CUSTOMER NO: 7794849

## CHANGE OF AGENT

NAME: BEACHLINE NORTH RESIDENTIAL,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

## 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. N	lame of the limited liability company: BEACHLINE N	IORTH RE	ESIDENTIA	AL, LLC		
2. (a)	12233 Tillinghast Circle	— (}	12233 T	illinghast Circle		
- · ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			iability compa OFFICE BOX	-	
	Palm Beach Gardens, FL 33418	<u>.                                    </u>	Palm Be	ach Gardens, FL 33418	,	
	August 29, 2014		L1400013	36436		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a'	)					
J, (4.	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of Sta	ite:		
	Primo Land, LLC					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_	20	
	12233 Tillinghast Circle				<u> </u>	
	Palm Beach Gardens	. 33418		_	202115-10 2.1	
	F ann beach Gardens F	L		<b></b>	2	•
(b)					E	٠.
` ′	Enter name of NEW Registered Agent and/or NEW Registere	d Office ad	dress:	_	99	
	Corporation Service Company				09	
	NEW Registered Office Address:			_		
	1201 Hays Street			_		
	Tallahassee . F	. 32301				
chang agent was/w	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	iws of the e registere iability co of the lim	d office ar mpany, it i ited liabili	nd the business office of is hereby confirmed that ty company or as othery	the register the change	red e(s)
	/s/ Todd Sheldon Todd Sheldon,			, Authorized Person		
Signa	ature of a member or authorized representative of a member			Printed or typed name of s	ignee	
provis the ob to mer	thy accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I ad in writing of this change.	ree to act e performe ed for in C hereby co	in this cap ince of my hapter 60, infirm that	acity. I further agree to duties, and I am familia 5, F.S. Or, if this docum the limited liability com	) comply wi ir with and ient is being ipany has b	th the accept g filed een
Lin	doey M. Baronie					
Signati Linds	ure () Registered Agent ey M. Baronie, Assistant Vice President on behalf of Corpo	oration Serv	rice Compa	ny		

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