L15000074594

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
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PICK-UP	☐ WAIT	MAIL				
/D:	siness Entity Nar					
(BC	ismess Emity Ivai	ne)				
(Do	ocument Number)					
Certified Copies	Certificates of Status					
Special Instructions to Filing Officer:						

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> S. WARREN MAR 2 2 2018

COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Divis	sion of Corporations				
SUBJECT:	Affordable Beach Houses of Florida, LLC				
	Name of Limited Liability Company				
Dear Sir or N	∕ladam:				
The enclosed	Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.		
Please return	all correspondence concerning thi	s matter to the	following:		
Washingto	on Garcia Sr.				
	Name of Person		_		
Affordable	Beach Houses of Florida, LL	.C			
	Firm/Company				
464 Shaw	nee Ln				
	Address				
Lake Wort	h, Fl, 33462				
	City/State and Zip Code				
-	n4000@yahoo.com				
E-mail	address: (to be used for future ann	ual report notif	ication)		
For further in	nformation concerning this matter,	please call:			
Washingto	on Garcia Sr.	561	396-4077		
	Name of Person		Area Code & Daytime Telephone Number		
Regi Divi	EET/COURIER ADDRESS: istration Section sion of Corporations	Re Di	AILING ADDRESS: gistration Section vision of Corporations		
2661	on Building Executive Center Circle ahassee, Florida 32301		O. Box 6327 Ilahassee, Florida 32314		
Encl	losed is a check for the following	amount:			
2 \$2	25 Filing Fee	□ \$3	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 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. Na	ame of the limited liability company: Affordable Bear	ch H	ouses of F	Florida, LLC		
2. (a)		/	b)			
(w)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	ξ'	D) <u></u>	Mailing address of lim		
	915 Spruce St, New Smyrna Beach,Fl, 32168		464 Sha	awnee Ln, Lake	⊎ Worth,Fl, 3	3462
						
	04/29/2016		L150000	74594		
3.	Date of filing/registration in Florida	4.		Document number	er	
5. (a)	UNITED STATES CORPORATION AGENTS,	INC				
J. (4)	Registered Agent and Registered Office shown on the records of the	Florid	a Dept. of Stat	- te:		
	Registered Office Address (MUST BE FLORIDA STREET AD	DRES	<u>z)</u>	-		
	13302 WINDING OAK COURT A,	<u>.</u>		_	AS I	
	TAMPA , FL 3	361	2	<u>-</u>	A S	<u> </u>
(b)	Washington Garcia Sr				21 F	
(-)	Enter name of NEW Registered Agent and/or NEW Registered Of	Tice at	idress:	-	75	Ö
	464 Shawnee Ln				PM 4: 35 Of STATE EFFLORIDE	
	NEW Registered Office Address;			_	,~	
	Lake Worth , FL 3:	3462	 -	-		
the cha agent was/w	imited liability company is not organized under the laws ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of the icles of organization or the operating agreement of the limited process.	of the regility che lir	e State of Fl istered offic company, it i nited liabilit	ee and the business is hereby confirme ty company or as c mpany.	s office of the re ed that the chan	egistered ge(s)
Signa	ture of a member or substitute of a member		asimigion	Printed or typed nar	me of signee	
I here provis the ob- to mer notifie	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete peligations of my position as registered agent as provided fely reflect a change in the registered office address, I her d in writing of this change.	to ac erforn for in reby c	et in this cap nance of my Chapter 60, confirm that	pacity. I further as duties, and I am f. 5, F.S. Or, if this is the limited liabili	gree to comply amiliar with an document is be ity company has	with the od accept ing filed : been
-	W					