## L15000142804

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(Address)								
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C. GOLDEN

AUG 2 2 2020

## **COVER LETTER**

TO: Registration Section Division of Corporations						
7930 West 30A, LLC SUBJECT:						
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.					
Please return all correspondence concerning th	nis matter to the following:					
Amy P. Slaman, Esq.						
Name of Person						
Clark Partington						
Firm/Company						
4100 Legendary Drive, Suite 200						
Address	<del></del>					
Destin, Florida 32541						
City/State and Zip Code						
aslaman@clarkpartington.com						
E-mail address: (to be used for future and	nual report notification)					
For further information concerning this matter	r, please call:					
Amy P. Slaman, Esq.	850 650-3304 at ()					
Name of Person	Area Code & Daytime Telephone Number					
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enclosed is a check for the following	g amount:					
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					
INHS18 (2/14)						

~W

## 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	me of the limited liability company: 7930 West 30A, L	LC ——				· · · · · ·	
2	(a)			(b)				
<b>2</b> .	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	(0)	Maili	ng address of limited	liability comp	any:
		298 Champion Court	_		298 Champion	Court		
		Destin, Florida 32541	_		Destin, Florida	32541		
		8/20/2015		I	.15000142804			
3.		Date of filing/registration in Florida	4.	_	Doo	cument number		
5	(a)							
٥.	(4)	Registered Agent and Registered Office shown on the records of the	he Flo	rida l	Dept. of State:			
		Amy P. Slaman, Esq.			orpe or care.		~~	
			DAD	rec:			2020 . na	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					=	
		4405 Commons Drive East, Suite 102			<u> </u>			-
		Destin	3254	l			0	
		, FL_			·		<u>-0</u>	
	(b)							<u> </u>
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office	add	ress:		 ဤ	
							ហ	
		Amy P. Slaman, Esq.						
		NEW Registered Office Address:			···			
		4100 Legendary Drive, Suite 200						
		Destin , FL	3254	1				
ag wa	ange ent v is/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law.	regist bility f the	tereo cor limi	d office and the npany, it is her ted liability co	e business office reby confirmed the mpany or as othe	of the regist	ered
_		Daniel C. Huis	<u>r</u>	Davi	d C Hull			
	-	ture of a member or authorized representative of a member				nted or typed name o	·	
the to no	ovisi e ohl mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I had in wrong of this change.	ee to d perfor for i ereby	act i rma n Ci v coi	in this capacity nce of my dutic hapter 605, F., nfirm that the i	v. I further agree es, and I am fami S. Or, if this doc limited liability c	to comply the liar with an ument is being ompany has	with the d accept ing filed been
Si	grafu	re of Registered Agent						