Division of Corporations Electronic Filing Cover Sheet

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(((H210002652043)))



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The same of the sa To: Division of Corporations id : Number : (850)617-6383 From: Account Name : M. BURR KEIM COMPANY Account Number : I19990000242 : (215)563-8113 : (215)977-9386

\*#Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE FV MISS BETTY, LLC

Certificate of Status	0
ertified Copy	0
: Count	02
Estimated Charge	\$25.00

JUL 12 2021

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Electronic Filing Menu Corporate Filing Menu

Help

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Ta:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of actions 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following states at a condense of change its registered office or registered agent, or both, in the State of Florida

1 M	ame of the limited liability compa	TO MISS E	BETTY	, LLC			
	985 Ocean Drive			(b) 985 Ocean Drive			
2. (a)	Principal office address of limi (Note: MUST HE STRE		(*	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	Cape May, NJ 03204			Cape May	, NJ 08204		
ē			*****		,		<del></del>
	1/2/2018			L16000233790			<del></del>
3.	Date of filing a vistrati	ion in Florida	4.	Doci	ument number		
5. (a	y W. Bradley Munice 🦠 👍						
J. (-	Registered Agent and Reg et al Office	ic shown on the records of	the Florida	Dept. of State:		2	ĭ
	239 E. Virginia Uticet					<u></u>	SES.
Registered Office for AMUST BE FLORIDA STREET ADDRESS)							4.E
						ھ	
	Tallahassee	, FI	32301			<b>P</b>	잃숙면
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:					9: 27	STATE ORATIONS
	7901 4th St 11						
	NEW Registered						
	STE 300						
	St. Peters***	, F	<sub>1.</sub> 3370	2			
the cl agent was/	Ilimited liability converses in not of hange or changes are a large, the F t will be identically a large authorises by an arrange of organization of organization of the properties of the prope	forida street address of	iability c	ompany, it is her	reby confirmed the many or as other	at the change	(s)
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provi the o	reby accept the approved that is in its in i	mistered agent and ag proper and complet wed agent as provid wred office address, t	zree to ac e perforn ed for in l hereby (	et in this capacity nance of my duti Chapter 605, F., confirm that the	y. I further agree es, and I am famil S. Or, if this docu limited liability co	to comply will are with and to ment is being ompany has be	accept filed gen
	ature of Registered Average	avre - Assista	nt Secr	etary			