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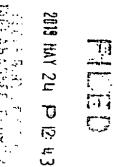
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	dL.
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	·
Special Instructions to Filing Officer:	

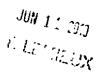
Office Use Only



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TO: Registration Section Division of Corporations	
SUBJECT: Beverly Flaine Inventor Name of Limi	Stments; LLC ted Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	o the following:
Suzanne Itanniford	
Bury Haine Investments, L Firm/Company	<u>CC</u>
P.O. BOX 2902 Address	
Jupitur FL 33468 City/State and Zip Code	
Beverly Clainelnyestments, LLC@ am E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please ca	II:
Suzanne Hunniford at (5	
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	ranamissee, rioitta 52.014
Enclosed is a check for the following amount:	
S \$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.

1. Name of the limited liability company: Bever	Jane Inve	Ifments, LLC
2. (a)) (b)	
Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
15889 110th Ave .N.	f.v. B	W_ 290Z
Jupiser F1 33478	<u>Jupite</u>	V RL 33468
5/15/2017 Date of filing/registration in Florida)OO 10737D
	4.	Document number
5. (a) <u>United States Carporation A</u> Registered Agent and Registered Office shown on the recor	is of the Florida Dept. of State	::
Registered Office Address	EET ADDRESS)	-
13302 Winding Dan Court		
13302 Winding Dak Court	JEL 33412	•
		-
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>		2 26
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>	tered Office address;	COD STREET
BELLC - Suzanne H.	anniford	2019 HAY 24
		· · · · · · · · · · · · · · · · · · ·
15889 110m Ave- N.		7
Jupiter	FL 33478	<u>.</u>
If the limited liability company is not organized under the change or changes are made, the Florida street addrengent will be identical. Or, in the case of a Florida limit was/were authorized by an affirmative vote of the members articles of organization or the operating agreement of	ss of the registered office ed liability company, it is ers of the limited liability	and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
Signature of a member of authorized reprysentative of a member	Printed or typed name of signee	
I hereby accept the appointment as registered agent and convolvisions of all statutes relative to the proper and complete obligations of my position as registered agent as proto merely reflect a change in the registered office address notified in writing of this change. Signature of Registered Agent	ilete performance of my a	duties, and Lam familiar with and accept
ľ		