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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Bay Point News Limited Liability Corporation	oration
DOCUMENT NUMBER: L17000134908	
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Hope Abbott-Turner	
Name of Contact Person	
Bay Point News Limited Liability Company	
Firm/Company	
397 Wahoo Rd	
Address	_
Panama City Beach, FL 32408	
City/State and Zip Code	
Hope@HopeAbbott.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, pl	case call:
Hope Abbott-Turner	at (850) 596-7653 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the I	Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

$\mathcal I$ STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this mge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Bay Point News Limited Liabilty Company
2. The principal	office address: 397 Wahoo Rd Panama City Bch, FL 32408
3. The mailing a	ddress (if different): PO BOX 27503 Panama City, FL 32411
4. Date of incorp	poration/qualification: 12/27/2022 Document number: L17000134908
5. The name and	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Jane Moore
	397 Wahoo Rd
	Panama City Bch, FL 32408
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Hope Abbott-Turner
	397 Wahoo Rd
	P.O. Box NOT acceptable
	Panama City Bch, FL 32408
The street address changed will	ess of its registered office and the street address of the business office of its registered agent be identical.
Such change wa authorized by ti	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Jane Y	November of director Specification of the Control o
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of the familiar with and accept the obligation of my position as registered agent. Or, if the filed merely to reflect a change in the registered office address. I hereby confirm that the been notified in writing of this change.
 If signing on be	half of an entity:
	ped or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *