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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GULF COAST BNB RONTALS, LLC Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
CYNTHIA TANT Name of Person GULF COAST BNB RENTALS, LLC Firm/Company
316 W CERVANTES ST, STEA
PENSACOLA FZ 3250/ City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CYNTHIA TANT at (850) 393-5134 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee S55 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 GULF COAT BNB RENTALS, LLC
2. (a) 316 W CERVANTES ST, (b) 316 W CERVANTES ST
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
PENSACOLA, FL 32501 PENSACOLA, FL 325
17/26 7 Date of filling/registration in Florida 4. Document number
5. (a) CXNTHIA TANT
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
PENSACUA FL 3250/
(b) CYNTHIA TANT
Enter name of NEW Registered Agent and/or NEW Registered Office address:
316 W CERVANTES STISTE A SEE TO
NEW Registered Office Address:
T- 10 10 10 10 10 10 10 10 10 10 10 10 10
17 NSHCOLA .FL 32501
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles(of organization) of the operating agreement of the limited liability company.
(parta land) CYNTHIA LANT
Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the
provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.
Signature of Registered Agent