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COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT:Beach Fun Ding, LLC	
Nam	e of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
Lisa VanDeBoe	
Name of Person	
Beach Fun Ding, LLC	
Firm/Company	
1250 N. Country Club Drive	
Address	
Crystal River, FL. 34429	
City/State and Zip Code	
plantationlisa@yahoo.com	
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this matter, p	please call:
Lisa VanDeBoe	352 634-0129
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 a	amount:
☑ S25 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. Na	me of the limited liability company: Bea	ch Fun D	ing, LLC	<u> </u>	
2. (a)	1250 N. Country Club Drive		(b)	1250	N. Country Club Drive
	Principal office address of limited liability co (Note: MUST BE STREET ADDRES)		_ (0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Crystal River, FL. 34429			Crysta	River, FL. 34429
				 _	
	August 27, 2018			L18000	0205275
3.	Date of filing/registration in Florid	a	4.		Document number
5. (a)	Northwest Registered Agent, LLC				
, ,	Registered Agent and Registered Office shown on the 7901 4th Street N.	records of th	ne Florida [Dept. of Stat	te:
	Registered Office Address (MUST BE FLORIDA Suite 300	STREET A	DDRESS)	•	-
	St. Petersburg	, FL_	33702	2	TILE TO AUG 19
(b)	Lisa VanDeBoe				16.19 16.19
	Enter name of NEW Registered Agent and/or NEW	Registered (Office addr	ess:	
	1250 N. Country Club Drive				A OF SMILE
	NEW Registered Office Address:				
	Crystal River	. FI.	34429		_
the cha agent www.westhe artic	mited liability company is not organized undinge or changes are made, the Florida street a rill be identical. Or, in the case of a Florida re authorized by an affirmative vote of the moles of organization of the operating agreement of a member of a listatutes relative to the proper and a gations of my position as registered agent as live reflect a change in the registered office at the proper of this office as the proper of the proper	ddress of t limited liab nembers of ent of the li	he registed bility come the limited lia Lisa	ered office pany, it i ed liabilit bility con VanDe	e and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in an apparatus. Boe Printed or typed name of signee

Signature of Registered Agent