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LI FELVIERX

COVER LETTER

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TO: Registration Section Division of Corporations

Reel-N-Paraiso, LLC SUBJECT:

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:

Jerry L. Hostetler

Name of Person

Firm/Company

8447 South Tularosa Court

Address

Lincoln, NE 68516

City/State and Zip Code

mscinmcl@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chad L. Bowman, Attorney at Law	402 476-8005
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

☑ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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. N	ame of the limited liability company: Reel-N-Parai	so, LL	.C					
2. (a)	8447 South Tularosa Ct.	ſ	(b) 8447 South Tularosa Ct.					
27 (u)	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	`		N	-			nility company: FICE BOX)
	Lincoln, NE 68516		-	Lincoln,	NE 685	16		
			-	. <u> </u>				
	03/08/2018		L	18000'A	5077	3		
3.	Date of filing/registration in Florida	4.			Documer	it numb	er	
5. (a)	Best Beach Getaways South LLC							
	Registered Agent and Registered Office shown on the records of	the Floric	da D	ept. of State	:			
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRES</u>	<u>55)</u>					
	3409 West County Highway 30A					f Sec	2019	
	Santa Rosa Beach	32459	9			AllA	2018 1436	
(b)	Larry McKee					ANASSEE, FL	22	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddro	<u>ess</u> ;		1 675	A ≓	C
						ORIDA	្ត	
	NEW Registered Office Address:							
	6005 Ridgeview Dr.							
	Milton, FL	32570)					
the cha agent v was/we	imited liability company is not organized under the lay nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	`the reg ability c of the lii	iste com mite	red office pany, it is ed liability bility com	and the b hereby co company	ousiness onfirme / or as c	office d that t otherwi	of the registered the change(s) se provided in
I herel provisi the obli to mere	up of member or authorized representative of a member by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, 11 i in writing of this change	ee to ac perforn d for in hereby c	ct ir nan Ch conj	r this cond	icity I fu	rther ac	nee to	comply with the

X Signature of Registered Agent

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Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00

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