L18000280965

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Registration Section

го:

Division of Corporations	•	•			
Beachpatti Properties, LLC	•				
	Name of Limited Liability Company				
Nam	ie of Limited	і Сіавініў Сотрапу			
Dear Sir or Madam:					
he enclosed Registered Agent/Registered Offi	ice Change a	nd fee(s) are submitted for filing.			
Please return all correspondence concerning thi	is matter to th	he following:			
Patricia A. Cole					
Name of Person					
Beachpatti Properties, LLC					
Firm/Company		 			
4433 Clipper Cove					
Address					
Destin, Fl. 32541					
City/State and Zip Code					
Beachpatti2@cox.net					
E-mail address: (to be used for future ann	ual report no	otification)			
For further information concerning this matter,	please call:				
Patricia Cole	850	376 5778			
	at ()			
Name of Person		Area Code & Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a check for the following	amount:				
■ \$25 Filing Fee		\$55 Filing Fee & Certified Copy			
JUS 18 (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 1:	Beachpatti Prope	rties LLC	
I. Na	me of the limited liability company:		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	4433 Chapper Cove		
	Destin, 71 32541		
	12/6/2018		L 18000280945
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	United States Corporation Age Registered Agent and Registered Office shown on the records of the state of the	nto, Inc	<u>. </u>
	13302 Winding Oak Court/5		omer 13 hd
	Registered Office Address (MUST BE FLORIDA STREET	(DDRESS)	
	Sulte 36		
	Tampa / ovlando FL	33412	2/31822
	, , , , , , , , , , , , , , , , , , , ,		
(b)	Patricia A. Cole	- · · · · · ·	7021 JAN 1
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	; ;
	4433 Clipper Cove		-
	NEW Registered Office Address:		A1110:
	Destin, FL	325	4 (
inge nt v s/we arti	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered off bility compar f the limited l limited liabili	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
gnat	Payra a COPE ure of a member or authorized representative of a member		Printed or typed name of signee
rel isi obli ere iea	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have been address, I have been address, I have been address, I have been address. I have been address and the conference of Registered Agent	ee to act in th	is canacity. I further agree to comply with the

1/7/2021

My corporation is "Beachpatti Properties, LLC". I would like to change the registered agent name to myself, Patricia A. Cole.

I was told that this would be changed/updated also with Legalzoom, but I will follow up.

I hope the enclosed paperwork is correct.

My email is <u>beachpatti2@cox.net</u> Phone number is 850 376 5778

Please advise if needed.

Pátricia Cole

4433 Clipper Cove

Destin Fl. 32541