L190000 22 640

(Requestor's Name)	
(Address)	
(Address)	
(1.001.005)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	us
Special Instructions to Filing Officer:	
	!
39-20	





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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PARADISE BOAT CHARTE Name of Limited Liability Com	Pany British B
Dear Sir or Madam:	节 Kin
The enclosed Registered Agent/Registered Office Change and fee(s) are su	ibmitted for filing.
Please return all correspondence concerning this matter to the following:	1.3 3.3 4.7 5.3 5.4 5.4 5.4 5.4 5.4 5.4 5.4 5.4 5.4 5.4
MARCEL R BEAUMONT Name of Person	
PARADISE BOAT CHARTER LLC Firm/Company	
6356 Brauch Wood M. Address	
Lake Worth, FL 33467 City/State and Zip Code	
HOUSES IN PARADISE OF AOU. COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
MARCEL R B EAUHONT at (954) Area Code	011376 e & Daytime Telephone Number
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division The Cen 2415 N.	ddress: tion Section of Corporations tre of Tallahassee Monroe Street, Suite 810 see, FL 32303

□ \$55 Filing Fee & Certified Copy

☐ \$25 Filing Fee

Enclosed is a check for the following amount:

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: PARALI	SE BOE	AT CHAPTER	L(6)
	6356 BRANCHWOOD DR	(b)	C 0 4 . C	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited l	
	Lake Worth Fl. 33467			
	07-26-2019	<u> </u>	19000022	040
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)				
	Registered Agent and Registered Office shown on the records of the	ne Florida Dept. of	f State:	
	Registered Office Address (MUST BE FLORIDA STREET A	DDDE CC)		
	GLENDALE, CA 91209-			2 ₹
	OCCIODACE, CA 118095	1096		
	, FL_			一克 (1)
(b)	HARCEL R BEAUMON	it		20 MAR -9 F
(0)	Enter name of NEW Registered Agent and/or NEW Registered (3
	6356 BRANCHWOOD D	R.		20 MAR -9 PM 2: 33
	NEW Registered Office Address:			
	LAKE WONTH FL3346	<u> </u>	 _	
	, FL_	·····		
change agent was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the r will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	registered office oility company, the limited lial	e and the business office of it is hereby confirmed that bility company or as othery	the registered the change(s)
/	Wyel	MARC	LEL R BEAUMO Printed or typed name of s	INT PRES
	ture of a member of authorized representative of a member			
provis The ob- to mer	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I he d'il writing of this change	e to act in this erformance of for in Chapter ereby confirm t	capacity. I further agree to my duties, and I am familio 605, F.S. Or, if this docun hat the limited liability con	o comply with the ir with and accept ient is being filed ipany has been
Signate	re of Registered Agent			