L190000	31628

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(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

Josh McLean Consulting LLC

SUBJECT:

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١,

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:

Camille Johnston

Name of Person

Five Star Beach Properties LLC

Firm/Company

12273 U S Hwy 98 W, Ste 208

Address

Miramar Beach FL 32550

City/State and Zip Code

accounting@fivestargulfrentals.com

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

For further information concerning this matter, please call:

Camille Johnston	334 at (	427-5935
Name of Person	······································	Area Code & Daytime Telephone Number
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		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

## 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 agont, or both, in the State of Florida

	12273 U.S. Hwy 98 W. Ste 208	(b)	12273 U S Hwy 98 W. Ste 208	
	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	······	Mailing address of limited liability com ( <u>Nuc: MAY BE POST OFFICE Be</u>	ipany:
	Miramar Beach FL 32550	<u> </u>	Miramar Beach FL 32550	<u> </u>
-			L19000031028	
	Date of filing/registration in Florida	4.	Document number	
(a) _	JOSHUA R MCLEAN		- 2	
R	Registered Agent and Registered Office shown on the records of	the Florida Dept. of St	ate: p 10	200
-	12273 U S HWY 98 W. STE 208			5
۲ -	Registered Office Address (MUST BE FLORIDA STREET			
	MIRAMAR BEACH	32550		8դ ։է հվ
հ)				α.
ł.r	nter name of NEW Registered Agent and/or NEW Registered	Office address	-	
	MONEESE, RICHARD (MONEESE TITLE LLC)			
	EW Registered Office Address	**************************************		
Ň				
ž	36468 EMERALD COAST PARKWAY, SUITE 1201			

the articles of organization or the operating agreement of the limited liability company. lle m Signature of a member or autorized representative of a member

Camille Johnston 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 mereby reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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