## h19 000 242673

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(Address)				
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(Business Entity Name)				
(Document Number)				
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## COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: \_ 2101 BEACH DRIVE SE HOLDINGS, LLC

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:

KAITLIN DOULOU

Name of Person

210) BEACH DRIVE SE HOLDINGS, LLC

Firm/Company

7732 BLUE QUAIL LANE

Address

ORLANDO, FL 32835

City/State and Zip Code

kait@buildventuresusa.com

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

For further information concerning this matter, please call:

KAITLIN DOULOU	727 455-7049 at ( )
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	<u>Street Address:</u>
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:

S25 Filing Fee

S55 Filing Fee & Certified Copy

DocuSign Envelope ID: 6F755479-167C-4448-85C6-45D D8CDDCBF

## 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	une of the limited liability company:	DRIVE SE H	OLDINGS, LLC		
2. (a)	7732 BLUE QUAIL LANE ORLANDO, FL 32835	(b)	7732 BLUE QUA	AIL I ANF ÒRLANDO, FI 	. 32835
	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )		Mailing address of limited liability company: ( <u>Note: MAY BE POST OFFICE BOX</u> )		
	7732 BLUE QUAIL LANE		7732 BLUE QUA	IL LANE	
	ORLANDO, FL 32835		ORLANDO, FL 3	2835	
	09/25/2019	I	.19000242673		
3.	Date of filing/registration in Florida		Docun	nent number	
5. (a)	THE MUNIZZI LAW FIRM				
J. (117	Registered Agent and Registered Office shown on the records THE MUNIZZI LAW FIRM	Dept. of State.			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			S. 202	
	1120 N RONALD REAGAN BLVD				
	LONGWOOD,	FL. <u>32750</u>		2022 AUG Ségaé is Táll á	
(b)	BrewerLong PLLC			HAS 5	<b>F</b> FR
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office add	ress:		
	BrewerLong PLLC			<b>• 29</b>	
	NEW Registered Office Address:				
	407 WEKIVA SPRINGS ROAD SUITE 241				
	LONGWOOD,I	FL. <u>32779</u>			
:hange igent v vas/we	imited liability company is not organized under the l or changes are made, the Florida street address of th vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	he registered liability cor s of the limi	foffice and the bi pany, it is hereby ed liability comp	usiness office of the regi v confirmed that the char	stered nge(s)
	<u>Poulon</u>		LIN DOULOU		
Signat	are of a member or authorized representative of a member		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 merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been not filed in this change.

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Trever	FARMYA.

ShinaBoasis Registered Agent

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