

L2000000

44149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

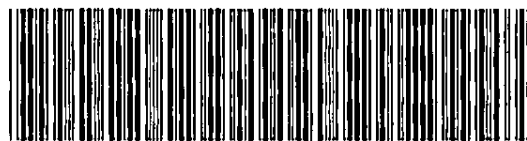
(Business Entity Name)

(Document Number)

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2020 APR 1 - 1 PM 2:27  
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APR 01 2020

I ALBRITTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Beach Weekend, 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:

Sonya O'Bannon  
Name of Person

\_\_\_\_\_  
Firm/Company

154 Brooks St SE Suite 101  
Address

Fort Walton Beach, FL 32548  
City/State and Zip Code

Sonya@nbiproperties.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sonya O'Bannon at ( 850 ) 243.0007  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2020 Apr 01 11:13

March 25, 2020

SONYA O'BANNON  
154 BROOKS STREET SE  
STE. 101  
FORT WALTON BEACH, FL 32548

SUBJECT: THE BEACH WEEKEND, LLC  
Ref. Number: L20000044149

We have received your document for THE BEACH WEEKEND, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 720A00006566

Check was not returned  
So can I assume that will  
be used for this? Tried  
calling but you are closed  
due to virus. TKS  
Sonya O'Bannon

**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. Name of the limited liability company: The Beach Weekend LLC
2. (a) 154 Brooks St SE Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
Suite 101  
Fort Walton Beach FL 32548
- (b) 154 Brooks St SE Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
Suite 101  
Fort Walton Beach FL 32548
3. 21 Oct 2020 Date of filing/registration in Florida
4. L200000044149 Document number

5. (a) Hipsh, Larry III  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

115 Miracle Strip Pkwy SE Suite 207  
Fort Walton Beach FL 32548

- (b) Sonya O'Bannon  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

154 Brooks St. SE  
**NEW Registered Office Address:**

Suite 101  
Fort Walton Beach FL 32548

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

James E. O'Bannon III  
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 notified in writing of this change.*

[Signature]  
Signature of Registered Agent

FILED  
2020 APR 11 PM 2:27  
TALLAHASSEE, FLORIDA  
STATE DEPT. OF REVENUE