121000322783

(Parwagtara Nama)				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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[<u> </u>				
Special Instructions to Filing Officer:				
LUODNE				
AUG 2 9 2023				
J. HORNE AUG 2 9 2023				

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COVER LETTER

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TO:	_	stration Section sion of Corporations				
SUBJE	ECT:	KMK BEACH PROPERTIES LLC				
501501		Name of Limited Liability Company				
Dear S	ir or N	Aadam:				
The en	closed	Registered Agent/Registered Off	ice Change a	and fee(s) are submitted for filing.		
Please	return	all correspondence concerning th	is matter to t	he following:		
Susan I	Rushin	8				
		Name of Person				
Rushin	g Law	Firm, PLLC				
		Firm/Company				
3124 W	Vest Co	ounty Highway 30A				
		Address				
Santa F	Rosa B	each, FL 32459				
		City/State and Zip Code				
susan@	Prushir	oglaw30a.com				
E	E-mail	address: (to be used for future and	ual report no	otification)		
For fur	ther in	nformation concerning this matter.	please call:			
Susan I	Rushin	इ	850 at (534-0123		
		Name of Person	(Area Code & Daytime Telephone Number		
	Reg Divi P.O.	ling Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Encl	osed is a check for the following	amount:			
	= \$2	25 Filing Fee	٥	\$55 Filing Fee & Certified Copy		

INHS18 (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.

. (a)	206 CULMAN AVENUE	(b)	5484 MASSEY POINTE COVE
. (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\-\-\- <u>-</u>	Mailing address of limited liability company: (Note: MAY BE, POST OFFICE BOX)
	SANTA ROSA BEACH, FL 32459	N	MEMPHIS, TN 38120
	07/15/2021	1.2	21000322783
	Date of filing/registration in Florida	4.	Document number
(a)	Rushing Law Firm, PLLC		
5. (a)	Registered Agent and Registered Office shown on the records	of the Florida De	ept. of State:
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	1394 COUNTY HIGHWAY 283 S. BLDG. I		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Santa Rosa Beach	FL	3 AUG
(b)			# F F F F F F F F F F
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office addre	FILED SSEE FLORIDA ISI
	NEW Registered Office Address:		
	3124 West County Highway 30A		
	Santa Rosa Beach	32459 FL	
hange gent v /as/w/	imited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	he registered of Tiability comp s of the limite	office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
			Printed or typed name of signee
	ture of a member or authorized representative of a member		

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

INHS18 (2/14)