L21000466969

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
<u></u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Endy Name)
(Document Number)
Certified Copies Certificates of Status
·
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: BLU FLAMINGO A	-fouse, LLC lited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
SKSKN GIANTBRONE Name of Person		
EDGAR GIANTBRONE PROP	ERTIES	
154 CRANE ST. Address		
Panama City Brack FL 324 City State and Zip Code		
E-mail address: (to be used for future annual repor	t notification)	
For further information concerning this matter, please ca		
Joseph Pr Grandstone, at (334) 750 -6775 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:		
S25 Filing Fee	□ \$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.

I. Na	me of the limited liability company: Blu Flamingo House, LLC.
	21926 FRONT BEACH ROAD Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	Panama City Buch FL 32413 Panama City Buch, FL 3
	10-27-2021 121000466969
3.	Date of filing/registration in Florida 4. Document number
5. (a)	SKSAN GLAMISRONE
3. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	547 N. Lakeshore Dr.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	2022
	Panama City Beach, FL 32413
(b)	DUSKN (FICKM POLOUS)
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	154 1000 54
	NEW Registered Office Address:
	Negistred Office Address.
·	Parama City Beach FL 32413
If the I	imited 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
	vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
	cles of organization or the operating agreement of the limited liability company.
	LUSAN MANUFORE SUSUN GIANDFORE
Signa	ture of a member or authorized representative of a member Printed or typed name of signee
provisi the obli to mere	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.
Signatu	Turan Statu Governo