()) 0000 433 D

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nar	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700402196217

ny magamangan-mga **25.00

10:11 -7 - 1:01



COVER LETTER

TO: Registration Section Division of Corporations						
BEACHLIFE DEVELOPMENT L	BEACHLIFE DEVELOPMENT LLC					
SUBJECT: Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered O	ffice Change ar	nd fee(s) are submitted for filing.				
Please return all correspondence concerning (this matter to th	ne following:				
PAMELA BELL						
Name of Person						
BEACHLIFE DEVELOPMENT LLC						
Firm/Company						
2408 S PENINSULA DR.						
Address						
DAYTONA BEACH, FL 32118						
City/State and Zip Code	•					
PAMELABELL777@GMAIL.COM						
E-mail address: (to be used for future a	nnual report no	tification)				
For further information concerning this matter	er, please call:					
PAMELA BELL	512 at (667-8362				
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	ng amount:					
■ \$25 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.

l. Na	ame of the limited liability company:	ELOPN	TENT LLC.	
2. (a)	2408 S PENINSULA DR. DAYTONA BEACH, FL 32118 (b) SAME AS			S OFFICE
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(``		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	JANUARY 24, 2022	_	1.22000043	322
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	UNITED STATES CORPORATION AGENTS INC.			_
	Registered Agent and Registered Office shown on the records of th	ite;		
	5575 S SEMORAN BLVD SUTTE 36 ORLANDO, FL 328	322		
	Registered Office Address (MUST BE FLORIDA STREET A	DDR <u>ES</u> :	<u>S7</u>	
				· <u>·</u> ·
	FL_			-
				- ;
(b)				<u> </u>
	Enter name of NEW Registered Agent and/or NEW Registered (Office ac	ldre <u>ss</u> :	:
	PAMELA BELL	-		; ; ; D
	NEW Registered Office Address:			
	2408 S PENINSULA DR. DAYTONA BEACH, FL 32118	· 		
	. H.			_
chang agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lial were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the Parnela Bell	register bility co f the lin	ed office a ompany, it nited liabil liability co	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to mei notific	thy accept the appointment as registered agent and agressions of all statutes relative to the proper and complete polications of my position as registered agent as provided rely reflect a change in the registered office address, I have in writing of this change. Pamela Bell	ve to ac perform I for in (vereby c	t in this cap ance of my Chapter 66 anfirm tha	pacity. I further agree to comply with the cluties, and I am familiar with and accept 15, F.S. Or, if this document is being filed the limited liability company has been
Signat	ure of Registered Agent			