

122000145255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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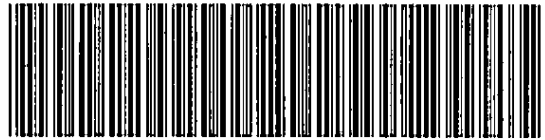
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9/19/22

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10/4/22  
DC

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

RECEIVED

2022 JUN 22 AM 11:28

**SUBJECT:** AVENIR HOMES, LLC

Name of Limited Liability Company AVENIR HOMES, LLC

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:

Sydney Grice

Name of Person

Anderson Business Advisors

Firm/Company

3225 McLeod Drive, #100

Address

Las Vegas, NV 89121

City/State and Zip Code

ra@andersonadvisors.com

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

For further information concerning this matter, please call:

Sydney Grice

Name of Person

at ( 800 ) 7064741

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: BETA CENTRAL FLORIDA RENTAL, LLC

2. (a) 3225 McLeod Dr, Suite 100  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
Las Vegas, NV 89121

(b) 3225 McLeod Dr, Suite 100  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
Las Vegas, NV 89121

3. 03/24/2022  
Date of filing/registration in Florida

4. L22000145255  
Document number

5. (a) BELHOMME, SCHAMIR J  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
3417 WINDY WOOD DR  
ORLANDO, FL 32812

(b) Anderson Registered Agents, Inc.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
625 E. Twiggs Street, Suite 110  
NEW Registered Office Address:  
Tampa, FL 33602

FILED  
2022 SEP 19 PM 5:57  
CLERK OF CIRCUIT COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE COUNTY OF HILLSBORO  
FLORIDA

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.

Sydney Grice  
Digitally signed by Sydney Grice  
DN: cn=Sydney Grice, o=My Company, email=sydney.grice@mycompany.com, c=US  
Date: 2022.09.19 15:56:47-0700  
Signature of a member or authorized representative of a member

Sydney Grice  
Printed or typed name of signer

*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.*

A. T. Mathis, President  
Digitally signed by A. T. Mathis, President  
DN: cn=A. T. Mathis, President, o=My Company, email=amathis@mycompany.com, c=US  
Date: 2022.09.19 15:56:47-0700  
Signature of Registered Agent