L23000211503

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT M	AIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status _					
Special Instructions to Filing Officer:					
J DENNIS					
JUL 2 8 2023					

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05/12/23--01012--023 **25.00

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	Coastline Executive LLC ECT:						
	Nam	Name of Limited Liability Company					
Dear 9	Sir or Madam:						
The er	sclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning thi	s matter to the f	following:				
Thoma	is E Landers Jr.						
*	Name of Person		_				
Coastli	ine Executive LLC						
	Firm/Company		_				
1500 S	an Roy Dr						
	Address						
Duned	in, Fl, 34698						
	City/State and Zip Code		_				
Tom@	coastlineexecutive.com						
I	E-mail address: (to be used for future ann	ual report notifi	ication)				
For fu	rther information concerning this matter,	please call:					
Tom L	anders	215 at (971-5950				
	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	□ \$5	55 Filing Fee & Certified Copy				
INHSI	8 (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.

1. N	ame of the limited liability company: Coastline Executi	ive LL	С				
2. (a)	1500 San Roy Dr.		(b) 1500 San Roy Dr.				
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		· · -	Mailing address of timited liability company: (Note: MAY BE POST OFFICE BOX)			
	Dunedin, FL, 34698		Dunedin, F	FL, 34698			
	4/28/2023		L230002115	553			
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 476 Riverside Ave	the Fk	rida D e pt. of State	- e: -			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
	Jacksonville , FI	3220	2	-			
(b)	Thomas E Landers Jr. Enter name of NEW Registered Agent and/or NEW Registeres	l Offic	address:	-			
	1500 San Roy Dr.						
	NEW Registered Office Address:			-			
	Dunedin , FI	3469	В	_			
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 li- tere authorized by an affirmative vote of the members of the operating agreement of the	regis ability of the	tered office and company, it is limited liability	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in			
/	MA MM	1	homas E Lande	rs Jr.			
provis the ob to men notifie	that of a number of uthors ded respectative of a member of the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I will writing of this change.	perfo	rmance of my a	luties, and I am familiar with and accept			

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

INHS18 (2/14)