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•		
· (Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(During Fig. 1)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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SECRETARY OF STATE

C. LEWIS NOV 2 1 2008 EXAMINER

i COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Beam Management, LCC (Name of Limited Liability Company)		
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:		
Kathryn Clifford (Name of Person)		
Beam Management, LCC (Firm/Company)	<u>, </u>	
2600 Courtland St		
Savasota, FL 34237 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Kathryn Clifford at (Name of Person)	941) 952-9070 (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 608.416 or 608.508, 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:	Management, LCC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 2600 Courtland St Jarasotu, FL 34237
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
10/24/03 3. Date of filing/registration in Florida	<u>M 03 00000 3540</u> 4. Document number
5. (a) Registered Agent and Registered Office shown of	n the records of the Florida Dept. of State:
Registered Agent:	ELLIOT Baruch
Registered Office Address:	LOT Tremont St Sarasota, FL 34242
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	
NEW Registered Agent:	KIVKA H. GEBTUCH
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Sarasota ,FL34237
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. (Signature of a member or authorized representative of a member)	eet address of the registered office and the business case of a Florida limited liability company, it is
(Printed or typed name of signee) I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the jam familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect comparm that the limited liability company has been notification.	proper and complete performance of my duties, and t on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby
(Signature of Registered Agent)	ea in writing of this change. ZECRET
Division of Corporations, P.O. Bo FILING FE	E: \$25.00
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