

M15000002755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

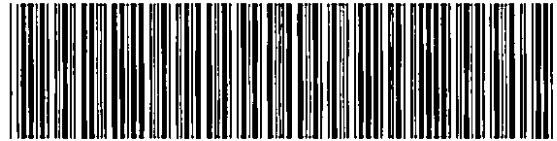
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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U.S. DEPARTMENT OF JUSTICE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 AUG 13 PM 2:53

N COOPER

AUG 15 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Beacon Street Lasata, LLC

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:

Patti Farha

Name of Person

Firm/Company

5200 Buffington Road

Address

Atlanta, GA 30349

City/State and Zip Code

patti.farha@cfacorp.com

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

For further information concerning this matter, please call:

Patti Farha

at (404) 684-8621

Name of Person

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: Beacon Street Lasata, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

5200 Buffington Road

5200 Buffington Road

Atlanta, GA 30349

Atlanta, GA 30349

4/15/2015

M15000002755

3. Date of filing/registration in Florida

4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

PARACORP INCORPORATED

Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)

155 OFFICE PLAZA DR., 1ST FLOOR

TALLAHASSEE, FL 32301

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

CT CORPORATION SYSTEM

NEW Registered Office Address:

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

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.

ABH
Signature of a member or authorized representative of a member

Ryan Harris
Printed or typed name of signee

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.

Michael Seraphin Michael Seraphin Asst. Secretary
Signature of Registered Agent

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 AUG 13 PM 2:53

BEACON STREET LASATA LLC
5200 BUFFINGTON RD
ATLANTA, GA 30349-2945

WELLS FARGO BANK, N.A.
www.wellsfargo.com
64-22/610

1266

8/2/2018

PAY TO THE ORDER OF Florida Division of Corporations

\$ **25.00

Twenty-Five and 00/100*****

DOLLAR

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

MEMO

Change Registered Agent



AUTHORIZED SIGNATURE

AKH

⑈0000001266⑈ ⑆061000227⑆ 5575364798⑈

BEACON STREET LASATA LLC

1266

Florida Division of Corporations

8/2/2018

Change Registered Agent

25.00

Operating Cash 4798 Change Registered Agent

25.00