M1700000 4225

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





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2019 JAN 25 AM 10: 11

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Bayside Lake RV LLC Name of Foreign Limited Liability Company
Dear Sir or Madam:
The enclosed application, certificate and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jennifer Smith Name of Person
The Tides Firm/Company
Firm/Company
6547 N. Avondale Address
Chicago, Th. 60031 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jennifer Smith 11(773)499-7255
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Division of Corporations P.O. Box 6327 Clifton Executive Center Circle Tallahassee, Florida 32301
Enclosed is a check for the following amount: S25 Filing Fee \$\sum \text{S30 Filing Fee & Certificate of Status}\$ CP2F055 (945)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Name of limited liability Company as it app	pears on the records of the Florida	Department of
State: Bayside Lake	RV LLC	
Enter new principal office address, if applicabl	le: <u>N/A</u>	
(<u>Principal office address</u> MUST BE A STREET ADDRESS)	6547 N. A.	ondale 600631
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	
2. The Florida document number of this limited	d liability company is:	200004225_
3. Jurisdiction of its organization:	nois	
4. Date authorized to do business in Florida: _	5/17/17	2019 15
SECTION II (5-9 complete only the applical	ble changes)	NAC 9
5. New name of the limited liability company: (t	must contain "Limited Liability Co	ompany, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adoption of the written consent of the managers or must contain "Limited Liability Company," "L	managing members adopting the	business in Florida and attach a
6. If amending the registered agent and/or regis registered agent and/or the new registered offic		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Futer Flor	du Street Address
	Zilier From	
	City	, Florida Zip Code
New Registered Agent's Signature, if changing I hereby accept the appointment as registered of the provisions of all statutes relative to the propand accept the obligations of my position as redocument is being filed to merely reflect a charliability company has been notified in writing of	agent and agree to act in this cap per and complete performance of gistered agent as provided for in nge in the registered office addres	my duties, and I am familiar with Chapter 605, F.S. Or, if this
	If Changing Registered Agent, Signature	mature of New Registered Agent

Tes Edward C. Zeman 654'I N. Avandale Add Chicago, IZ 60631 Record CEO Jeffrey J. Fannon 6547 N. Avandale 18 Add Chicago, IZ 60631 Record Chicago, IZ	har
Chicago, IL 60631 Rec EO Jeffrey J. Fannon 6547 N. Avanda le MAda Chicago, IL 60631 Rec FO Mark P. Connolly 65747 N. Avanda le MAda Chicago, IL 60631 Rec	ha, move
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FO Mark P. Connolly 6547 N. Avondale Made Chicago, Il 60631 Ren	i
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Filing Fee: \$25.00