## N05000010014

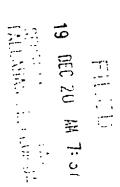
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Garfinkel Whyn <sub>ot</sub> 300 N. Maitlanc Aveue Maitland, FL 32751 20046-001				

Office Use Only



500337910425

12/20/19--01008--021 \*\*33.00



JAN 24 2020 S. YOUNG

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.05 ange is submitted for a corporation orga	•	·
_	er to change its registered office or regis	<del>.</del>	··
1. The name of	the corporation: RUNAWAY BEAC office address: 3000 BONFIRE B	H CLUB CONDOMINIUM AS	SOCIATION, INC
	IEE FL, 34746		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 09/29/2005	Document number: N0500	00010074
	d street address of the current registered rument of State: (If resigned, enter resign		th the
	Dann, Lori, COO, c/o Artemi	s Lifestyles, Inc	
	1631 E. Vine Street		
	Kissimmee, FL 34744		77.79
6. The name and (if changed):	d street address of the new registered age	ent (if changed) and /or registered off	aice Allice
	Garfinkel Whynot		¥
	300 N. Maitland Avenue		<del>- 1</del>
	Maitland, FL 32751	F acceptable	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its	registered agent,
Such change wa authorized by th	ts authorized by resolution duly adopted the board, or the corporation has been no	d by its board of directors or by an outfied in writing of the change.	officer so
1/		Kevin Ross , President	·
hereby accept further agree to performance of agent. Or, if thi	the appointment as registered agent an to comply with the provisions of all stat my duties, and I am familiar with and a is document is being filed merely to refi that the corporation has been notified i	utes relative to the proper and comp accept the obligation of my position lect a change in the registered office	olete As registered
Harla Size	Macule	12-11-16	1
if signing on bel	half of an entity:		
Garfing	KCI WYLLYVOT, P.A.		

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)