

P230000352419
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : INCORP SERVICES INC
Account Number : I20120000007
Phone : (702)866-2500
Fax Number : (702)900-2290

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TALLAHASSEE, FL

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**REGISTERED AGENT CHANGE
BEACHSIDE FINANCIAL GROUP INC.**

Certificate of Status	0
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Beachside Financial Group Inc.
Name of Corporation

DOCUMENT NUMBER: P23000035249

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following.

Wendy Hefley

Name of Contact Person

InCorp Services, Inc.

Firm/Company

3773 Howard Hughes Pkwy. - Suite 500S

Address

Las Vegas, NV 89169-6014

City/State and Zip Code

documents@incorp.com

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

For further information concerning this matter, please call:

Wendy Hefley on behalf of InCorp Services, Inc. at 800-246-2677

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2023-054111

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U.S. DEPT. OF STATE
TALLAHASSEE, FL

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Beachside Financial Group Inc.
2. The principal office address: 1331 Saxon Drive, Suite 174
New Smyrna Beach, FL 32169
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/03/2023 Document number: P23000035249
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Brian Bartos1331 Saxon DriveNew Smyrna Beach, FL 32169

6. The name and street address of the new registered agent (if changed) and or registered office (if changed):

InCorp Services, Inc.3458 Lakeshore DriveP.O. Box NOT acceptableTallahassee, FL 32312

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

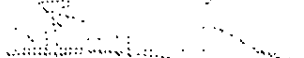
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Admitted

 Signature of an officer or director
Brian Bartos, President

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


 Signature of Registered Agent
05/05/2023

Date

If signing on behalf of an entity:

Louise Brytenbach on behalf of InCorp Services, Inc.

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
 CR28048 (04/13)

SECRETARY OF STATE
 TALLAHASSEE, FL

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