that my name appears above, or on an attachment with all other like empowered.

Entity Name: AC PROPERTIES, LLC **Current Principal Place of Business:**

450 ALTON ROAD 3505 MIAMI, FL 33139

Current Mailing Address:

DOCUMENT# L04000013463

450 ALTON ROAD 3505 MIAMI, FL 33139

FEI Number: 20-0756709

Name and Address of Current Registered Agent:

CALVO, DANIEL 450 ALTON ROAD APT 3505 MIAMI BEACH, FL 33139 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Authorized Person(s) Detail :

| Title | MGRM | Title | MGRM |
|-----------------|----------------------|-----------------|----------------------|
| Name | CALVO, DANIEL | Name | ATASSI, SAMER |
| Address | 450 ALTON ROAD 3505 | Address | 450 ALTON ROAD 3505 |
| City-State-Zip: | MIAMI BEACH FL 33139 | City-State-Zip: | MIAMI BEACH FL 33139 |

SIGNATURE: DANIEL CALVO MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

Certificate of Status Desired: No

03/21/2015

Date

Date