# A03000001456

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SECRETARY OF STATE DIVISION OF CORPORATIONS

09 APR -2 AM II: 09

T. HAMPTON

APR - 3 2009

**EXAMINER** 

### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: GONZALEZ PROPERTY INVESTMENTS, LTD.

(Name of Limited Partnership or Limited Liability Limited Partnership)

# DOCUMENT NUMBER: A03000001456

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

Please return all correspondence concerning this matter to:

(Contact Person)	
(Firm/Company)	
P.O. Box 170840	
(Address)	
Hialeah, Florida 33017	
(City, State and Zip Code)	

To Turner information concerning this matter, prease can

Juan C. Gonzalez at (305) 822-5455

(Name of Contact Person) (Area Code and Daytime Telephone Numb

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

### STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

INHS04 (01/06)

### **MAILING ADDRESS:**

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

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited

	ed liability limited partnership and office or registered agent, or			
<sub>1.</sub> GONZALE	Z PROPERTY INVES	STMENTS, LTD		
Na	ame of Limited Partnership or Lim	ited Liability Limited Partners	ship	
2.10/10/2003		<sub>3.</sub> A0300001456		
Date of filing	g/registration in Florida	Florida document number		
4. The name of the re Department of State:	egistered agent and the registered of	office address as shown on the	e records of the Florida	
	Vezina, Lawrence 8	Piscitelli, P.A.		
	Nam	e	-	
300 SW First Avenue, Suite 150				
	Addre	ess	•	
	Fort Lauderdale, Flo	orida 33301		
	City, State	and Zip	•	
5. The name and Flo	rida street address of the new regis	stered agent and/or office:		
Vezina, Lawrence & Piscitelli, P.A.			3	
Name				
	121 Alhambra Plaza	a, Suite 1604	· <b>r</b>	
Florida street address (P.O. Box not acceptable)				
	Coral Gables	<sub>FL</sub> 33134		
	City, State	and Zip		
6. Such change(s) is/	are effective when filed by the Flo	rida Department of State.		

Signature of General Rartner

accept the appoinment as registered agent and agree to act in this capacity. I further agree to vovisions of all statutes relative to the proper and complete performance of my duties, liar, with an accept the obligations of my position as registered agent.

Signature of Registered Agent

Filing Fee: \$35.00 Certified Copy (optional): \$52.50