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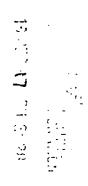
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Alon Bron From gave outhor: zation to correct Current R.A. dec 12/17
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: A JB Properties L+d Name of Limited Partnership or Limited Liability Limited Partnership		
DOCUMENT NUMBER: <u>A 9500000029</u>	_	
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:		
Alan J Brontman Contact Person A J B Properties, LTD Firm/Company 22639 Esplanada Cirale Address		
City, State and Zip Code Semail address: (to be used for future annual report notification)	19 CEC \7	
For further information concerning this matter, please call: Alan Brondman at (56/) 4/4-5555 Name of Contact Person Area Code and Daytime Telephone Number	8년 3: 기명 :	

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

MAILING ADDRESS:

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



November 4, 2019

ALAN J BRONFMAN AJB PROPERTIES, LTD 22639 ESPLANADA CIRCLE BOCA RATON, FL 33433

SUBJECT: AJB PROPERTIES, LTD.

Ref. Number: A9800000029

We have received your document for AJB PROPERTIES, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 619A00022749

www.sunbiz.org

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 partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.
1. AJB Properties Ltd
Name of Limited Partnership or Limited Liability Limited Partnership
2. 12/11/1997 3. A980000029
Date of filing/registration in Florida Florida document number
4. The name of the registered agent and the registered office address as shown on the records of the Florid Department of State:
Alan J Brontwan
Name
Alan 5 Brontweys Name 22639 Esplanada Civele Address
$\mathcal{B}_{1,2}$ $\mathcal{D}_{1,2}$ $\mathcal{D}_{2,2}$
Boca Reton Fl. 33433 City, State and Zip
5. The name and Florida street address of the new registered agent and/or office:
Matt Brontwan_ Name
Name
22639 Esplanada Cirele
Florida street address (P.O. Box not acceptable)
Boca Ratun FL 33433 City, State and Zip
City, State and Zip
6. Such change(s) is/are effective when filed by the Florida Department of State.
Mag f. Beaufrer
Signature of General Partner
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 an accept the obligations of my position as registered agent.
Signature of Registered Agent

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