

L0000000015436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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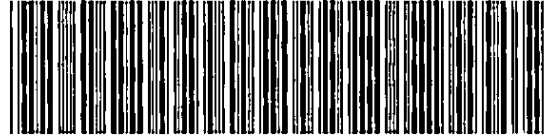
(Business Entity Name)

(Document Number)

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12/21/18

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AJ PROPERTY HOLDINGS, L.L.C.  
Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Vanessa Simpson  
Name of Person

AJ PROPERTY HOLDINGS, L.L.C.  
Firm/Company

PO Box 4955  
Address

Winter Park FL 32793  
City/State and Zip Code

ajpropvs@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vanessa Simpson at ( 786 ) 357-4139  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: AJ PROPERTY HOLDINGS, L.L.C.

2. (a) Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
7457 ALOMA AVE STE 301  
WINTER PARK FL 32792

(b) Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
PO BOX 4955  
WINTER PARK FL 32793

3. 12/13/2000 Date of filing/registration in Florida

4. L00000015436 Document number

5. (a) Kathleen E Saft  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
4100 METRIC DRIVESUITE 100WINTER PARK, FL 32792  
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
4100 METRIC DRIVE SUITE 100  
WINTER PARK, FL 32792


(b) VANESSA SIMPSON  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
7457 ALOMA AVENUE, STE 301, WINTER PARK FL 32792  
NEW Registered Office Address:  
7457 ALOMA AVENUE, STE 301  
WINTER PARK, FL 32792

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 Signature of a member or authorized representative of a member

ROBERT L ASHTON Printed or typed name of signee

*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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
Signature of Registered Agent