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D. SCOTT DEC 13 2016

## **COVER LETTER**

TO;	Registration Section Division of Corporations			
SHR.	S.B. Real Estate Investmen	nts LLC		
.501		me of Limit	ed Liability Company	
Dear	Sir or Madam:			
The e	enclosed Registered Agent/Registered Of	Tice Change	and fee(s) are submitted for filing.	
Pleas	e return all correspondence concerning t	his matter to	the following:	
Hag	ai Shechter			
-	Name of Person			MI DEC -7 P 8:11
	Firm/Company			18874 1 - J
221	W. Hallandale Beach Blvd., Suite	107		D 8 1
	Address			GRITA THE STATE OF THE STATE OF
Hall	andale, FL 33009			37
	City/State and Zip Code			
haga	ai555@gmail.com			
	E-mail address: (to be used for future ar	inual report	notification)	
For f	urther information concerning this matte	r, please cal	l:	
Hag	ai Shechter	305	725-7518	
	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	ig 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.

2. (a)    221 W. Hallandale Beach Blvd, Suite 107   National Beach Blvd, Suite 107   New Registered Office Address   Number of New Registered Office Number of New Registered Office Address   Number	1. Na	me of the limited liability company: S.B. Real Es	tate Investement	s LLC
Principal office address of limited liability company: (Nate: MAY BE STREET ADDRESS)  Hallandale, FL 33009  Hallandale  Hall		• • •	(b) 221 W.	Hallandale Beach Blvd., Suite 107
3. Date of filing/registration in Florida 4. Document number  5. (a) Usher Bryn ESQ  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  18851 NE 29 Avenue, Suite 1010  Registered Office Address	z. (a)	•	(0)	
3. Date of filing/registration in Florida 4. Document number  5. [a] Usher Bryn ESQ  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  18851 NE 29 Avenue, Suite 1010  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  Aventura  FL 33180  [b] Hagai Shechter  Enter name of NEW Registered Agent and/or NEW Registered Office address:  221 W. Hallandale Beach Blvd., Suite 107  NEW Registered Office Address:  Hallandale  FL 33009  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.  Hagai Shechter  Signature of a member or authorized by an affirmative vote of the members of the limited liability company.  Hagai Shechter  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 and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent 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 filled to merely reflect a change in the registered agent so provided for in Chapter 605, F. S. Or, if this document is being filled to merely reflect a change in the registered agent and complete performance of my duties, and I am		Hallandale, FL 33009	Halland	lale, FL 33009
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Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  18851 NE 29 Avenue, Suite 1010  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  Aventura  FL 33180  FL 33180  FL 33180  FL 33009  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 gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change or 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.  Hagai Shechter  Signature of a member or authorized representative of a member  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 bias change.	3.	Date of filing/registration in Florida	4.	Document number
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	provisa the obt to mer	ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I	ree to act in this ca e performance of my ed for in Chapter 60 hereby confirm tha	pacity. I further agree to comply with the duties, and I am familiar with and accept 15, F.S. Or, if this document is being filed the limited liability company has been
Signature of registere Agent	Signatu	re of Registered Agent		