04000064757

(Address)							
(Address)							
(City/State/Zip/Phone #)							
(Business Entity Name) (Document Number)							
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Special Instructions to Filing Officer:							

Office Use Only



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08/16/10--01027--024 **25.00

T. HAMPTON

AUG 1 7 2010

EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations						
	# 17 to to the confidence of t						
SUBJ	ECT:	All C	ounty	y Prop	erties	, LLC	
		ne of L	imite	d Liabil	ity Com	ipany	
Dear S	Sir or Madam:						
(12)	I ID ' IA W		× 00	C1	1.0	() 1 1 1 0 71	
The ei	nclosed Registered Agent/Regis	tered C	office (Change	and fee	(s) are submitted for filing	į.
Please	e return all correspondence conc	erning	this m	atter to	the foll	owing:	
	Dennis Shanno	n			_		
	Name of Person						
	All County Properties Firm/Company	s, LLC					
	_			! ***,	غور م	JONE OFFICERS	
	32° 1'11'18 Fee	51 I II	405				
	120 East Oakland Park Address	<u> 31va,.#</u>	105 .	attr-			
	Citabatsen Provide (1961						
	Fort Lauderdale, Floric	la 3333	34	1.	S. Grand	3.37	
	City/State and Zip Code	<u>u 000</u>	<u></u>				
12	dennis@realestatesecuredi	nvesto	rs.co	m			
r.	-man address: (to be used for future annua	i report n	ouncan	(11)			
For fu	rther information concerning th	is matte	er, ple	ase call	:		
	Dennis Shannon		_ at (_		_)	290-3212	•
	Name of Person				Area Code	& Daytime Telephone Number	
	STREET/COURIER ADDRES	S:		MA	ILING	ADDRESS:	
	Registration Section Registration Section						
	Division of Corporations Clifton Building Division of Corporations P.O. Box 6327						
	Clifton Building						
	2661 Executive Center Circle Tallahassee, Florida 32301			Tall	ahassee,	Florida 32314	
	-Enclosed is:a check for the	ollowin	game	ount:	er wills		
	[7] \$25 Dillion Box	" [9]	(⁷⁰ ″ or 9∞		5 12111	Faa & Cartified Conv	
	\$25 Filing Fee	, 🕶		د ال	gniiri c	Fee & Certified Copy	
INHS18				-			

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

-							
Name of the limited liability company:	All County Properties, LLC						
2. (a) Principal office address of limited liability compar	ny: 120 East Oakland Park Blvd, #105						
(Note: MUST BE STREET ADDRESS)							
	Fort Lauderdale, Florida 33334						
(b) Mailing address of limited liability company:	120 East Oakland Park Blvd, #105						
(Note: MAY BE POST OFFICE BOX)							
	Fort Lauderdale, Florida 33334						
08/31/04	L04000064757						
3. Date of filing/registration in Florida	4. Document number						
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
Registered Agent:	Dennis Shannon						
Registered Office Address:	1620 WEST OAKLAND PARK BLVD #404 FORT LAUDERDALE, FL 33311						
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW</u> Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Dennis Shannon 120 East Oakland Park Blvd, #105						
	Fort Lauderdale ,FL 33334						
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider liability company, it is hereby confirmed that the change (so the members of the limited liability company or as other or the operating agreement of the limited liability company. 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 comply with the provisions of all statutes relative to the plant of the pla	Florida street address of the registered office ntical. Or, in the case of a Florida limited system of the registered office ntical. Or, in the case of a Florida limited system of the case of a Florida limited system of the capacity. I further applications of the capacity. I further applications of the capacity. I further applications of the capacity.						

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00