L040008a3aa

· (Re	equestor's Name)						
(Ac	idress)						
(Ac	ldress)						
(Ci	ty/State/Zip/Phon	e #)					
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	_ Certificate	s of Status					
Special Instructions to Filing Officer:							

Office Use Only



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07/10/15--01013--024 **25.00

15 JUL 10 PN 1: 48

J. HARRIS

COVER LETTER

	egistration Section ivision of Corporations	•							
SUBJECT.	Alternative Realty Corp. LL	-C							
Name of Limited Liability Company									
Dear Sir o	r Madam:								
The enclos	sed Registered Agent/Registered O	ffice Change	and fe	e(s) are submitted for filing.					
Please reti	urn all correspondence concerning t	his matter to	the fol	llowing:					
Constan	ce June Allen								
	Name of Person			•					
Alternati	ve Realty Corp. LLC								
	Firm/Company	* ****		•					
3200 NE	E7th Court, C303								
	Address			•					
Pompan	o Beach, Florida 33062								
	City/State and Zip Code			•					
realtyma	atcher@gmail.com								
E-ma	ail address: (to be used for future ar	inual report i	otifica	ation)					
For further	r information concerning this matte	r, please call	:						
Constan	ce June Allen	954 at (788-6346					
	Name of Person		1	Area Code & Daytime Telephone Number					
ST	TREET/COURIER ADDRESS:		MAII	LING ADDRESS:					
	egistration Section		-	stration Section					
	ivision of Corporations			ion of Corporations					
	lifton Building			Box 6327					
	661 Executive Center Circle allahassee, Florida 32301		ıailal	hassee, Florida 32314					
Eı	Enclosed is a check for the following amount:								
Ø	\$25 Filing Fee		\$55	Filing Fee & Certified Copy					

INHS18 (2/14)

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.	Na	me of the limited liability company: Alternative Re	alty Co	rp. LLC				
2.	(a)	1110 N. Riverside Dr., #28	(b) 1110 N. Riverside Dr., #28					
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0		Mailing address of limited li			
		Pompano Beach, Florida 33062		Pompano	o Beach, Florida 33062			
		11/15/04	_	L0400008	2322			
3.		Date of filing/registration in Florida	4.	I	Document number			
5.	(a)	Constance June Allen						
	(-)	Registered Agent and Registered Office shown on the records of the 3200 NE 7th Court,	:					
		Registered Office Address (MUST BE FLORIDA STREET A) C303						
		Pompano Beach EL	33062	-				
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address Constance June Allen NEW Registered Office Address:				l <u>ress</u> :		FILED		
1110 N Riverside Dr., #28								
			33062		ANDA ANDA	1: 48		
the age wa	e cha ent w s/we arti	mited liability company is not organized under the lawinge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liability.	he regis pility co the lim imited l	tered office ampany, it is ited liability	and the business office hereby confirmed that company or as otherw pany.	t the change(s)		
_		ure of a member or authorized representative of a member	Printed or typed name of s	ignee				
I he to not	herel ovision obli mere tified	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had not support the status of this change.	e to act verforma for in C vereby co	in this cana	acity. I further garee to	o comply with the		