L060000031762

(Re	equestor's Name)	
(Ac	idress)	····
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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	Office Heat Out	1/100



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07/18/06--01047--016 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Altos Pointe Investment, LLC (Name of Corporation)		
DOCUMENT NUMBER: LOGOCCO 31762		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:		
Edward D. Pascoe (Name of Contact Person)		
Altos Pante Investment (Firm/Company)		
1871 N-W. North Rwer Drive En	90	
Miami Florida 33125-2218 (City/State and Zip Code)	81 JUL 80	
मंग	PH	
For further information concerning this matter, please call: at ()	が	
Edward Pascoe 305-326-0060 X102m	17	
(Name of Contact Person) (Area Code & Daytime Telephone Number	r)	
Enclosed is a \$35.00 check made payable to the Department of State.		

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Street Address:

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE FOR LIMITED LIABILITY COMPANY

This statement of change is submitted for a limited liability company organized under the laws of the State of Florida in order to change its registered office in the State of Florida.

	1. The name of the Limited Liability Company: A Hos Ponts Truestment LL	Ċ	
	2. The principal office address: 1871 N. W. Morth River Drive, Miami, Correviously 253 500 22 dos. Mia. Fr. 35135)	(7. °	33,25
	3. The mailing address (if different):		
	4. Date of information: July 30,2000 Document number: L060000 31762		% =
	5. The street address and mailing address of the new registered office:		
	1871 N.W. North River Orive, Migmi, Fl. 33125 ES	OG JUL	
	Such change was authorized by resolution duly adopted by its Managing Member.	8	=
-5	Edward D. Passee Monaser	S. S	Ember :
	(Signature of an officer or director) (Printed or typed name and tale)	=	

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)