## L0600122780

| (Re                                     | questor's Name)    |           |
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| (Cit                                    | y/State/Zip/Phone  | #)        |
| PICK-UP                                 | ☐ WAIT             | MAIL      |
| (Bu                                     | siness Entity Name | e)        |
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## COVER LETTER

| TO: Registration Section Division of Corporations  |   |  |
|--|---|--|
| SUBJECT: 4104 Property Name of Limit   | huestments UC ed 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:  |   |  |
| PUTAN ROUA SOYSAL<br>Name of Person  |   |  |
| ROLA INTERNATION ALV   | CERTY   |  |
| 18851 NE 29th Ave. SI  | UTC 700   |  |
| ALENTURA FL 33170  City/State and Zip Code   |   |  |
| E-mail address: (to be used for future annual report notification)   |   |  |
| For further information concerning this matter, please call:   |   |  |
| R ROLLA SOYSA at (6) Name of Person  | 46)3347550 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  |  |

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

| Florida.  |
|---|
| 1. Name of the limited liability company: 4104 PROPERTY INVESTMENTS LLC   |
| 2. (a) 2875 DE 1915 FREEL (104)  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)   |
| AVENTURA, FL, 33/80 ALENTRA, FL, 33/80  |
| 12)27/206 L0600122780  3. Date of filing/registration in Florida 4. Document number   |
| 5. (a) PREMER BUSINESS MANAGEMENT U.C. Registered Agent and Registered Office shown on the records of the Florida Dept. of State:   |
| 2875 WE 1915 DEET 404  Registered Office Address MUST BE FLORIDA STREET ADDRESS   |
| AVEUTURA FL 33180   |
| (b) KONA INTERNATIONAL REALTY LOCKS - Enter name of NEW Registered Agent and/or NEW Registered Office address:  |
| NEW Registered Office Address:  |
| AUBUTURA FL 33180   |
| 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 preparization or the operating agreement of the limited liability company.  |
| Signature of a member or authorized representative of a member  Netwell Method |
| 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.  |

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

Signature of Registered Agent