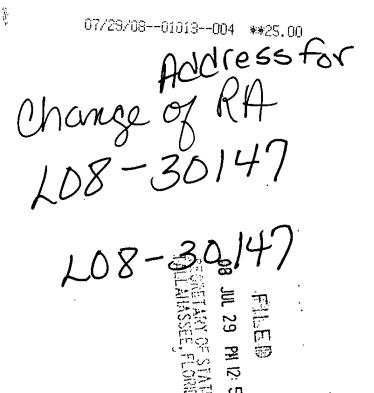
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(Re	equestor's Name	)
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N. CAUSSEAUX

JUL 3 0 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: 2140 INVESTMENTS, LLC (Name of Lim	nited 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 m	natter to the following:		
Charles Gamble			
(Name of Person)			
K&L Gates LLP (Firm/Company)			
200 South Biscayne Blvd., Suite 3900			
(Address)			
Miami, Florida 33131			
(City/State and Zip Code)			
For further information concerning this matter, ple	ease call:		
Charles Gamble at (_	305 ) 539-3307		
(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 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 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.

1. Na	ame of the limited liability company: 2140 INVESTM	MENTS, LLC	
2. (a)	Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	·	
(b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	200 South Biscayne Blvd. Suite 3900 Miami, Florida 33131	
	1/2008	L08000030147	
3. Da	ate of filing/registration in Florida	4. Document number	
5. (a	) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
	Registered Agent:	William J. Spratt, Jr.	
	Registered Office Address:	200 S. Biscayne Blvd., 20th Floor Miami, Florida 33131	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address:  William J. Spratt, Jr.	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	200 South Biscayne Blvd., Suite 3900	
	,	Miami	
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.  (Signature of a member or authorized representative of a member)  William J. Spratt, Jr.			
	d or typed name of signee)  ehv accent the appointment as registered agent and as	gree to act in this capacity. I further garee to	
	eby accept the appointment as registered agent and as ly with the provisions of all statutes relative to the promition with and accept the obligations of my position of a light and accept the obligations of my position of a light and accept the obligations of my position of a light and accept the light accept the light acceptance of the light and the light acceptance of the light accepta	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.	
(Signa	Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314	

**FILING FEE: \$25.00**