## L08000107980

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(P <sub>1</sub> )	siness Entity Nar	ma)
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer	
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## **COVER LETTER**

TO:

INHS18 (2/14)

Registration Section

Divisi	ion of Corporations				
SUBJECT:	Four Aces Properties, LLC	;			
Jobacci	Name of Limited Liability Company				
Dear Sir or M	adam:				
The enclosed	Registered Agent/Registered Offi	ce Change a	and fee(s) are submitted for filing.		
Please return a	all correspondence concerning thi	s matter to t	he following:		
	Maria J. Cervantes				
	Name of Person				
	SMGQ LAW				
	Firm/Company		<del></del>		
	201 Alhambra Circle, Suite	1205			
	Address	·	<del></del>		
	Coral Gables, FL 33134				
	City/State and Zip Code		<del></del> _		
	ncervantes@smgqlaw.com				
E-mail a	ddress: (to be used for future anni	ual report no	tification)		
For further inf	formation concerning this matter,	please call:			
Roland San	chez-Medina	305	377-1000		
	Name of Person		Area Code & Daytime Telephone Number		
Regis Divisi Clifto 2661	tration Section ion of Corporations in Building Executive Center Circle massee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclo	sed is a check for the following	amount:			
<b>□</b> \$2:	5 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 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.

	13687 SW 26 St.	(b)	Same
	Principal office address of limited liability company:		Mailing address of limited liability company
	(Note: MUST BE STREET ADDRESS) Miami, El. 22175		(Note: MAY BE POST OFFICE BOX)
	Miami, FL 33175	<del></del>	<u> </u>
	04/15/2013		L08000107980
	Date of filing/registration in Florida	4.	Document number
	Olga Adrian		
	Registered Agent and Registered Office shown on the records of	of the Florida Dep	ot. of State:
	Registered Office Address (MUST BE FLORIDA STREET)	T ADDRESS)	<del></del>
	13687 SW 26 ST.		
	<b>M</b> iami , <sub>F</sub>	33175	
	, .		<del></del>
			· i
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office address	<u>.</u>
	Registered Corporate Services LLC		
	NEW Registered Office Address:		
	201 Alhambra Circle, Suite 1205		<del></del> _
	Coral Gables	<sub>:L</sub> 33134	
1	mited liability company is not organized under the I	aws of the Stat	te of Florida, it is hereby confirmed that aft
n	msc or changes are made, the Florida street address will be identical. Or mathe case of a Florida limited	of the registere liability compa	ed office and the business office of the regis
	re authorized by an affirmative vote of the members despyf organization or the operating agreement of the	s of the limited	lliability company or as otherwise provided
c	elegyt biganization of the operating agreement of the		l' X i
c			$\alpha_{VO}$ $\Delta_{OVC}$ $\alpha$ $\alpha$ $\alpha$
	ure of a member of authorized representative of a member		Printed or typed name of signee