

109000005587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

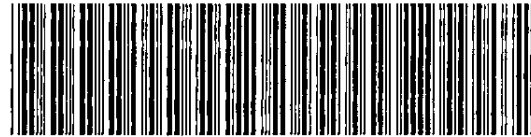
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11 JUN - 8 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Attorneys Property Group, LLC
Name of Corporation

DOCUMENT NUMBER: L09000065587

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:

Gary N. Mansfield
Name of Contact Person

First Health, Incorporated
Firm/Company

3350 SW 148th Avenue, Suite 220
Address

Miramar, FL 33027
City/State and Zip Code

gnmesq@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary N. Mansfield at (954) 239-1172
Name of Contact Person Area Code & Daytime Telephone Number

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

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

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

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. Name of the limited liability company: ATTORNEYS PROPERTY GROUP LLC

2. (a) Principal office address of limited liability company: 3350 SW 148th AVE
SUITE 220
MIAMI FL 33027

(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

(SAME)

3. Date of filing/registration in Florida: 07/08/2009

4. Document number: L9000065587

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

MONAIS, WILSON

Registered Office Address:

8785 NW 13th TERR
MIAMI, FL 33176

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

GARY MANSFIELD

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

LAW OFFICES OF GARY N. MANSFIELD
3350 SW 148th AVE SUITE 220
MIAMI, FL 33027 PA

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

GARY MANSFIELD

Printed or typed name of signer

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 608, 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 the change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32374

FILING FEE: \$25.00

FILED
 JUL 15 2009
 TALLAHASSEE
 FLORIDA