

L090000117505

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Law Offices of
ERNESTO SANCHEZ

1313 Ponce de Leon Blvd., Suite 301
Coral Gables, Florida 33134
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Ernesto Sanchez, Esq.

Ms. Gina McLeod
Regulatory Specialist II
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Subject: ED-IRA Estate Investments, LLC. – Ref. Number L09000117505

Dear Ms. McLeod,

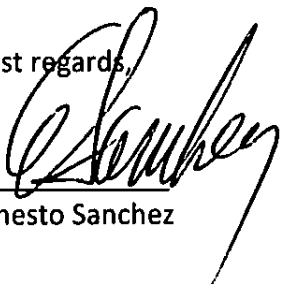
Thank you for your help on this matter.

Please find enclosed Original Statement of Change amended to show name and address of the current Register Agent/Office.

I have initialed the change, and enclosed a copy of the previous document without revisions.

Again, thank you for your cooperation, and I will appreciate whatever you can do to expedite this matter.

Best regards,



Ernesto Sanchez

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ED-IRA Real Estate Investments, LLC.
Name of Limited 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:

c/o Ernesto Sanchez, Esq.
Name of Person

Ernesto Sanchez P.A.
Firm/Company

1313 Ponce de Leon Blvd., Suite 301
Address

Coral Gables, FL. 33134
City/State and Zip Code

esanch@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ernesto Sanchez at (305) 441-2040
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. Name of the limited liability company: ED-IRA Real Estate Investments, LLC.

2. (a) Principal office address of limited liability company:

2655 LeJeune Rd.

(Note: MUST BE STREET ADDRESS)

Suite 507, Coral Gables, FL.
33134

(b) Mailing address of limited liability company:

2655 LeJeune Rd. Suite

507, Coral Gables, FL. 33134

(Note: MAY BE POST OFFICE BOX)

December 10, 2009

3. Date of filing/registration in Florida

L09000117505

4. Document number

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

Registered Agent:

URDANETA, JUAN V.

Registered Office Address:

2655 LEJEUNE ROAD STE. 507
CORAL GABLES, FL 33134

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

NEW Registered Agent:

c/o Ernesto Sanchez P.A.

NEW Registered Office Address:

1313 Ponce de Leon Blvd.

(MUST BE FLORIDA STREET ADDRESS)

Suite 301
Coral Gables, FL 33134

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

EDUARDO CHOCROJ CEDEXO

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. 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 this change.

Signature of Registered Agent

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

FILED FEE: \$25.00

FILED
JAN - 4 PM 2:
TALLAHASSEE, FL

[Handwritten signature]