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(Re	equestor's Name)		
(Ad	ldress)		
(Address)			
(Cit	ty/State/Zip/Phone) #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
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EXAMINER



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COVER LETTER

то:	Registration Section Division of Corporations		
SUBJ	SUBJECT: Housing Realty Investments, LLC Name of Limited Liability Company		
		Traine of Emined Entering Company	
Dear	Sir or Madam:		
The e	nclosed Registered Agent/R	egistered Office Change and fee(s) are submitted for filing.	
Please	e return all correspondence	concerning this matter to the following:	
	Michael J. Cr	aparro	
	Name of Perso		
	Housing Realty Inve		
	Firm/Company		
	1900 Coral Wa	ay #300	
	Address		
	Miami, Fl. 3		
	City/State and Zip	Code	
E	mjchaparro09@ -mail address: (to be used for future	gmail.com annual report notification)	
For fu	orther information concerning	g this matter, please call:	
	Michael J. Chaparro	at (<u>305</u>) <u>746-4449</u>	
	Name of Person	Area Code & Daytime Telephone Number	
	STREET/COURIER ADD	RESS: MAILING ADDRESS:	
	Registration Section	Registration Section	
	Division of Corporations	Division of Corporations	
	Clifton Building	P.O. Box 6327	
	2661 Executive Center Circl Tallahassee, Florida 32301	e Tallahassee, Florida 32314	
	Enclosed is a check for t	he 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:	Housing Realty Investments, LLC
2. (a) Principal office address of limited liability c	company: Housing Realty Investments
(Note: MUST BE STREET ADDRESS)	1900 Coral Way # 300 Miami, Fl 33145
(b) Mailing address of limited liability company	y: Housing Realty Investments, LLC
(Note: MAY BE POST OFFICE BOX)	1900 Coral Way Miami, Fl. 33145
03/12/2010	L10000027913
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	own on the records of the Florida Dept. of State:
Registered Agent:	Jose E. Garcia
Registered Office Address:	7370 west 29 Ave
	Hialeah, FI 33018
	AH. DEC
(b) Enter name of NEW Registered Agent and	/or NEW Registered Office address
NEW Registered Agent:	Michael J. Chaparro
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES	1900 Coral Way # 300 💆 🔊 🗔
(MUST BE FLORIDA STREET ADDRES	Miami Sc.FL93145
of the members of the limited liability company or or the operating agreement of the limited liability company or the limited liability or the	e, the Florida street address of the registered office
Tose Evormo García Printed or typed name of signee	
Signature of Registered Agent Division of Corporations, P.O.	nt and agree to act in this capacity. I further agree to othe proper and complete performance of my duties, of my position as registered agent as provided for in each to merely reflect a change in the registered office company has been notified in writing of this change. Box 6327, Tallahassee, FL 32314 FEE: \$25.00