

L10000051763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

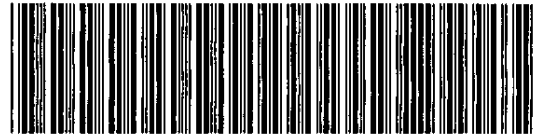
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch SEP 26 2013

POST

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AJ Lavin Investments
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:

Andrew Lavin
Name of Person

AJ Lavin Investments
Firm/Company

9255 Nugent Trl.
Address

West Palm Beach, FL 33411
City/State and Zip Code

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

For further information concerning this matter, please call:

Andy Lavin at (561) 383 6456
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

\$35 check
already paid

Please issue
a \$10 credit



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2013

ANDREW LAVIN
9255 NUGENT TRAIL
WEST PALM BEACH, FL 33411

SUBJECT: AJ LAVIN INVESTMENTS, LLC
Ref. Number: L10000051763

We have received your document for AJ LAVIN INVESTMENTS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You submitted the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch
Regulatory Specialist II

Letter Number: 213A00021494

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: AS Lavin Investments

2. (a) Principal office address of limited liability company: 9255 Nugent Trl.
 (Note: **MUST BE STREET ADDRESS**) West Palm Beach, FL 33411

(b) Mailing address of limited liability company:
 (Note: **MAY BE POST OFFICE BOX**) _____

5/13/10
 3. Date of filing/registration in Florida

220000052763
 4. Document number

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

Registered Agent: Legalzoom

Registered Office Address: 101 N. Brand Blvd
Glendale, CA 91201

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

NEW Registered Agent: Andrew Lavin

NEW Registered Office Address: 9255 Nugent Trl.
 (MUST BE FLORIDA STREET ADDRESS) West Palm Beach
 _____, FL 33411

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 TALLAHASSEE FLORIDA

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]
 Signature of a member or authorized representative of a member

Andrew Lavin
 Printed or typed name of signee

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 this change.

[Signature]
 Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00