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SECRETARY OF STATE
ASSEE, FLORIDA

MAR 13 2012

COVER LETTER

TO: Registration Section Division of Corporations			
	2 2702-2707 P I Liability Company	roperties	, W
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted	for filing.	
Please return all correspondence concerning this ma	atter to the following:		
Miguel Quintero Name of Person			
Firm/Company			
240 Crandon Blud Suit Address Wey Biscaure, FL 331 City/State and Zip Code Investment First group (E-mail address: (to be used for future annual report notification) For further information concerning this matter, please	Jamail.com	2012 MAR 12 AM 8: 22 SECRETARY OF STATES TALLAHASSEE, FLORIDA	
	754 <u>214-345</u> Area Code & Daytime Telephone	7 e 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		
Epclosed is a check for the following amo	unt:		
\$25 Filing Fee	\$55 Filing Fee & Certified	Сору	

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: Best Pc	oinciana 2702-2707 Prop U
2. (a) Principal office address of limited liability company	: 240 Crandon Blud 232
(Note: MUST BE STREET ADDRESS)	Bey Biscayne, FC 33149
(b) Mailing address of limited liability company:	POBOX 490718
(Note: MAY BE POST OFFICE BOX)	hey biscayne fc
5/19/2010	272839348
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	AGI Registered Agents, Inc
Registered Office Address:	100 Brikell Aug Ste 300 Mami, FL 33/3
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	W Registered Office address: Miquel Quintero
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	240 Crandon Blvo Ste 232 Key Bis cayne ,FL 33149
If the limited liability company is not organized under the lonfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identified liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company Signature of member or authorized representative of a member Thereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the province and I am familiar with and accept the obligations of my post and I am familiar with and accept the obligations of my post chapter 608, F.S. Or, if this document is being filed to mend address, I hereby confirm that the limited liability company Signature of Registered Agent	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization

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