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TALL AHASSEF, FLORIDA

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J. SAULSBERRY EXAMINER MAR 1 3 2012

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Best Atlantia Name of Limited I	C 512 Properties LLC Liability Company	<u>-</u>
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.	
Please return all correspondence concerning this mate	ter to the following:	
Miguel Quintero Name of Person		
Best Atlantic 512 Property	HE H	2012 MAR
240 Crandon Blud Suite 23	32) M P
Key BISCAUXU FL 33149 City/State and Zip Code		3
E-mail address: (to be used for future annual report notification)	al.com	
For further information concerning this matter, please	e call:	
Migrel Quintero at 95	Area Code & Daytime Telephone Number	-
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amount	nt:	
√1\$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: Best f	Hontin 512 Properties 110
	0112 2 2011 4 10 11 11 222
2. (a) Principal office address of limited liability compan	·
(Note: MUST BE STREET ADDRESS)	Key Biscayne, FL 33149
(b) Mailing address of limited liability company:	PO. BOX 490718
(Note: MAY BE POST OFFICE BOX)	hey Biscayne FL 33149
5/19/2010	L100000 540 48
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	AGI Registered Agents Inc
Registered Office Address:	1000 Brickell Ave Ste 300 Muami, FL 33131
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:	Miguel Quintero
NEW Registered Agent: NEW Registered Office Address:	a a de Blad cle 220
(MUST BE FLORIDA STREET ADDRESS)	Kly Bisrayre, FL 33149
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden 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 a member of authorized representative of a member	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote.
Mavel Quintero	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my por Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compand	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in early reflect a change in the registered office by has been notified in writing of this change.
Signature of Registered Agent	