## L110000017144

(Requestor's Name)					
(Address)					
(Address)					
(City/	State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
(2000)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					
PA					





700239882347

09/24/12--01021--017 \*\*25.00

SECRETARY OF STATE

2012 CED 21. NM : 94 S

J. SAULSBERRY EXAMINER

SEP 26 2012

## **COVER LETTER**

Division of Corp	orations						
SUBJECT:	Linco	In Prop	erty Hold	inas. LL	С		
			Liability C		<u> </u>	,,	-
			•				
Dear Sir or Madam:							
The enclosed Registered	Agent/Registered	Office (	Change and	fee(s) are s	submitted for	filing.	
Please return all correspondent	ondence concernin	ng this m	atter to the f	ollowing:			
Aldı	rick Gonzalez						
Na	me of Person		_				
	operty Holdings I	LLC					
Fir	m/Company				,	<del></del>	_ •
2000 81147	70th Assessed Otto	200				ALC: SEC	<b>311</b> 2
	<u>'9th Avenue Ste</u> Address	328				A	筠
						SS.	12 SEP 24
Dana	NEL					7 0 7	
	Florida 33166					77.00	T.
City/St	ate and Zip Code					SS	g <sub>2</sub> 52
01						0.7	52
E-mail address: (to be used	Inv@gmail.com	1 notificatio	<u>m)</u>				
			,				
For further information of	oncerning this ma	itter, plea	ise call:	•			
Aldrick Go	nzalez	at (	305 )		6321297		
Name of Per	son		Area C	ode & Daytir	ne Telephone Nu	mber	
STREET/COURI	ER ADDRESS:		MAILIN	G ADDRE	SS:		
Registration Section				ion Section			
Division of Corpor				of Corpora			
Clifton Building			P.O. Box	6327			
2661 Executive Ce Tallahassee, Florid			Tallahass	see, Florida	32314		
Enclosed is a ch	eck for the follow	ing amo	unt:				
\$25 Filing Fee	;		\$55 Fil	ing Fee &	Certified Cop	ру	

**TO:** Registration Section

## 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.

Name of the limited liability company:	Lincoln Property Holdings, LLC			
2. (a) Principal office address of limited liability co	mpany:			
(Note: MUST BE STREET ADDRESS)	3900 NW 79th AVE site 328 Doral, FL 33166			
(b) Mailing address of limited liability company:				
(Note: MAY BE POST OFFICE BOX)	3900 NW 79th AVE ste 328 Doral, FL 33166			
02/09/2011	L11000017144			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office show				
Registered Agent:	Aldrick Gonzalez			
Registered Office Address:	22932 sw 114th place 325 N - miami, fl 33170			
(b) Enter name of <b>NEW Registered Agent</b> and/o				
NEW Registered Agent:	Aldrick Gonzalez			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS				
	<u>Doral</u> ,FL <u>33166</u>			
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the cha of the members of the limited liability company or as or the operating agreement of the limited liability considerable.  Signature of amember or authorized representative of a member	the Florida street address of the registered office			
Aldrick Gonzalez				
Printed or typed name of signee  I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability co				
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00				