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AA INVESTMENT MANAGEMENT LLC

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: AA Investment Management LLC						
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:						
Tara Morales						
Name of Person						
Capitol Corporate Services, Inc.						
Firm/Company						
800 Brazos Ste 400						
Address						
Austin TX 78701						
City/State and Zip Code						
Magda41@bellsouth.net						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Tara Morales at (800) 345-4647						
Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: MAILING ADDRESS:						
Registration Section Registration Section Division of Corporations Division of Corporations						
Clifton Building P.O. Box 6327						
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301						
Enclosed is a check for the following amount:						
\$25 Filing Fee & Certified Copy						
INTIS18 (2/14)						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursi subm Flori	iant to the provisions of sections 605.0114 or 605.0116 the following statement in order to change its res	5, Florido Statutes, i gistered office or re	he undersigned limited liability company egistered agent, or both, in the State of	
	ame of the Limited Liability Company:	nt Management	LLC	
2. (a)	AA Investment Management LLC Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		estment Management LLC Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	3820 SW 79th Avenue, Sulte 92	3820 S	W 79th Avenue, Suite 92	
	Miami, FL 33155	Miami,	FL 33155	
_	11/01/11	<u>L11000</u>		
3.	Date of filing/registration in Florida	4.	Document number	
5, (a	Capitol Corporate Services, Inc. Registered Agent and Registered Office shown on the records of	also Manido Done of Otal	• •	
	155 Office Plaza Dr Ste A Registered Office Address		SECRETA FALLAHAS	12 ANA C
	Tallahasssee , FI	, 32301	RY OF	-
(b	Magda Santiso Enter name of NEW Registered Agent and/or NEW Registered	Office address:	FLORIDA	
	Magda Santiso	······	-	
	NEW Registored Office Address: 3820 SW 79th Avenue, Sulte 92		-	
	Miami ,FI	, 33155	<u>.</u>	
the clagent was/v	limited liability company is not organized under the language or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registered offic ability company, it i of the limited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
	6//	Ellis R. Mirs	ky	
I her provi the or to me	nture Cantompot or authorized representative of a member eby accept the appointment as registered agent and ag- sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.		Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited itability company has been	
Signa	und of Registered Agent Magd	a Santiso	DV 22234	

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

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