## 1100/3250

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**ENTITY NAME:** 

1824 INFINITY LLC

CK# 7417 FOR \$25.00

PLEASE FILE THE ATTACHED CHANGE OF AGENT & RETURN THE FOLLOWING:

\_\_ CERTIFIED COPY

XXX STAMPED COPY

\_\_\_ CERTIFICATE OF STATUS

Examiner's Initials

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company: 1824 Infinity	LLÇ	·		
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  8950 SW 74th Court, Suite 1901		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  8950 SW 74th Court, Suite 1901		
	Miami, FL 33156		Miami, I	FL 33156	
	November 22, 2011		L110001	32510	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Registered Agent and Registered Office shown on the records of Carlos M Machado Esq.  Registered Office Address (MUST BE FLORIDA STREET)  201 Alhambra Circle Suite 1205	f the Flor	•	JALLAII.	
	Coral Gables , F	3313	34	٠ <u>٢</u> ٢٠	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Atrium Registered Agents, Inc.  NEW Registered Office Address: Town Center One, 8950 SW 74th Court, S			AM 8: 00	
	Miami , F	<sub>L</sub> 3315	6	_	
Signat of the object of the ob	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the district of a member of all statutes relative to the proper and completely accept the appointment as registered agent and an interest of a member of all statutes relative to the proper and completely reflect a change in the registered office address, and in writing of this change.  The of Registered Weint it is not of Corporations P.O.  Division of Corporations P.O.	aws of the reliability of the le limite Jeree to e perfori le hereby	he State of FI gistered offic company, it imited liability corose L. Nuncose L. Nuncose L. Nuncose L. nuncose tin this capmance of my confirm that	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.  ez, Authorized Representative  Printed or typed name of signee  pacity. I further agree to comply with the dulies, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	