## #12000022480

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K.SALY EXAMINER APR 1 2 2013

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: 8311 SW 157 AVENUI	E 705, LLC	. Company		
Name of	Limited Liability	Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	Office Change ar	nd fee(s) are submitted for filing.		
Please return all correspondence concerning	g this matter to th	e following:		
Datan Dorot				
Name of Person				
Dorot & Bensimon PL				
Firm/Company				
2775 Sunny Isles Blvd. Suite 1	18			
Address				
North Miami Beach, FL 33160				
City/State and Zip Code	-			
info@dorotbensimon.com				
E-mail address: (to be used for future annual report	notification)			
For further information concerning this mat	tter, please call:			
Datan Dorot	at (305	921-9421		
Name of Person	Ar	ea Code & Daytime Telephone Number	_	
STREET/COURIER ADDRESS:	MAII	MAILING ADDRESS:		
Registration Section		Registration Section		
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	ı alıar	nassee, Florida 32314		
Enclosed is a check for the following	ing amount:			
■ \$25 Filing Fee	<b>\$55</b>	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. Na	ame of the limited liability company: 8311 SW 157 AVENU	JE 705, LLC				
2. (a)	Principal office address of limited liability compa		y: 3440 SW 134 Court			
(Note: MUST BE STREET	(Note: MUST BE STREET ADDRESS)	Miami, FL 33175				
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3440 SW 134 Court					
	(Note: MAY BE POST OFFICE BOX)	Mlami, FL 33175				
			- V 30			
			20 3			
	15, 2012	L12000022480	<b>9</b>			
3. Da	ate of filing/registration in Florida	4. Document number	95 B			
5. (a	Registered Agent and Registered Office shown on the records of the Florida Dept. of State.					
	Paristared Agents	Dorot & Bensimon PL				
	Registered Agent:	DOTAL BOTTAIN OF TE	<del> </del>			
	Registered Office Address:	2775 Sunny isles Blvd				
		118				
		North Miami Beach, FL 33160				
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	EW Registered Office adda				
	NEW Registered Office Address:	2775 Sunny Isles Blvd				
	(MUST BE FLORIDA STREET ADDRESS)	118	<del></del>			
	(MCB1 BE1 EONIDA BIREEI ADDRESS)	North Miami Beach	.FL 33160			
confir and the liabilithe m the or		Florida street address of the entical. Or, in the case of a F (s) was/were authorized by a wise provided in the articles of the articles.	registered office			
Datan Do	NO!					

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 698, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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

Printed or typed name of signee