

C12000053357

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

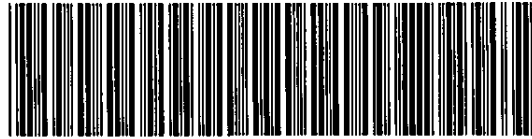
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DEC 02 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 3, 2016

SAMUEL VELEZ
5600 NW 76 OL
COCONUT CREEK, FL 33073 US

SUBJECT: CORNERSTONE FINANCIAL INVESTMENTS,LLC
Ref. Number: L12000053357

We have received your document for CORNERSTONE FINANCIAL INVESTMENTS,LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 416A00023692

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cornerstone Financial Investment, 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:

Marilyn Velaz
Name of Person

Cornerstone Financial Investment, LLC
Firm/Company

5600 NW 74 PL
Address

Coconut Creek FL 33073
City/State and Zip Code

MarilynVelaz25@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marilyn Velaz at (305) 747-9787
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$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 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. Name of the limited liability company: CORNERSTONE FINANCIAL INVESTMENT LLC.

2. (a) 5600 NW 76 PL COCONUT CREEK (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. 1/14-14 4. L12000053357
 Date of filing/registration in Florida Document number

5. (a) Samuel Velez
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
5600 NW 76 PL COCONUT
COCONUT CREEK, FL 33073

(b) Marilyn Velez
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

5600 NW 76 PL
NEW Registered Office Address:

COCONUT CREEK, FL 33073

DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA
 16 NOV 30 PM 1:15
 FILED

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Samuel Velez Signature of a member or authorized representative of a member
Samuel Velez Printed or typed name of signee

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 605, 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.

Samuel Velez
 Signature of Registered Agent