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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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JUN 16 2014

R. WHITE

Álantic Gulf Property Investments LLC

390 N. orange Ave., Ste. 2125 / Tel 407-730-3969 / Fax 407-730-3971

.;

May 28, 2014

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Sirs:

Effective June 2, 2014 the principal office address in all the entities included herein is changing to the following address (both physical and mailing):

390 N. Orange Ave., Ste. 2125 Orlando, FL 32801

Included for processing the filing are the following "Statements of Change of Registered Office or Registered Agent for a Limited Liability Company" and accompanying checks for related filing fees:

Document No.	Name of Entity	Ck No.	Amount
L12000055653	Atlantic Gulf Property Investments LLC	1735	\$ 25.00
L12000057181	Atlantic Gulf Property Investments II LLC	1735	25.00
L13000131545	Atlantic Gulf Property Advisory LLC	1735	25.00
L12000086731	Third Atlantic Gulf Property Investments LLC	1735	25.00
L12000097178	Atlantic Gulf Colonial Property Investments LLC	1735	25.00
L13000074487	Atlantic Gulf Property Management LLC	1008	25.00
L13000056607	Syed Real Estate Investments LLC	1015	25.00
L13000068707	Atlantic Gulf Realty LLC	1057	25.00
L13000116950	Fifth Atlantic Gulf Property Investments, LLC	1020	25.00

If you have any questions please contact the undersigned at telephone number 407-730-3969 or at my email address at richard@atlanticgulfproperties.com.

Richard Soto, Accountant

Atlantic Gulf Property Investments

COVER LETTER

	Registration Section Division of Corporations				
SUBJE	Third Atlantic Gulf Property Investments LLC				
	Name o	of Limited Liab	ility Company		
Dear Sir	or Madam:				
The enc	losed Registered Agent/Registered Office	Change and fe	e(s) are submitted for filing.		
Please re	eturn all correspondence concerning this i	natter to the fol	lowing:		
SALIM	I N. VALIANI				
	Name of Person				
Third A	Atlantic Gulf Property Investments I	LC			
	Firm/Company				
390 N	ORANGE AVE., STE 2125				
	Address	·			
ORLA	NDO, FL 32801				
	City/State and Zip Code				
VALIA	NI.SALIM@GMAIL.COM				
E-1	mail address: (to be used for future annua	l report notifica	tion)		
For furth	her information concerning this matter, pl	ease call:			
SALIM	N. VALIANI	407 at (730-3969		
	Name of Person	1	Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regis Divis P.O. 1	LING ADDRESS: tration Section ion of Corporations Box 6327 hassee, Florida 32314		
	Enclosed is a check for the following amount:				
	■ \$25 Filing Fee	\$55	Filing Fee & Certified Copy		

INHS18 (2/14)

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.	Na	ame of the limited liability company: Third Atlantic	Gulf P	roperty Inv	vestment	s LL	<u> </u>			
	(a)			o)						
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(-	Mailing address of limited lia (Note: MAY BE POST OF						
		390 N Orange Ave., Ste. 2125		390 N O	range Av	e., S	Ste. 212	25		
		Orlando, Fl 32801		Orlando	, FI 3280	1				
		7/02/2012		L1200008	86731					
3.		Date of filing/registration in Florida	 4.		Document	num	ber			
5.	(a)	Salim N. Valiani								
J.	(u)	Registered Agent and Registered Office shown on the records of	the Florida	a Dept. of State	- e:					
		7550 Futures Dr., Ste 102 Orlando Fl 32819	9							
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u></u>	-					
		7550 Futures Dr., Ste. 102								÷
		Orlando , FI	32819		-	;	3>5;	7.		٠.
		Salim N. Valiani					<u> </u>	ر ا را ا		
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			-		Şi.	12.3	:	
				<u></u>					. ,	
							1080J	ΪŞ	'ج- يــ ١	
		NEW Registered Office Address:			-					
		390 N Orange Ave., Ste. 2125			-		2.5	CD.		۳,
		Orlando , FI	32801		_					
ıf.	ha 1	imited liability company is not organized under the la	wa of the	State of Ele	- omido itio l	a a ra b	v aanfir	mad tl	not ofto	
the	chą	mge or changes are made, the Florida street address o	f the regi	stered office	e and the bi	usine:	ss office	of the	e registe	ered
age	ent (is/w	will be identical. Or, in the case of a Florida limited here authorized by an affirmative vote of the members	iability co	ompany, it is vited liabilit	s hereby co v company	nfirn or as	ned that	the ch	ange(s) svided i) in
		igles of organization or the operating agreement of the								
	Δ	Company.	Sal	lim N. Vali						
_		ture of a member or authorized representative of a member			Printed or t	•	_		1	
pro the to no	here ovisi e ob mer tifie	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide ely neflect a change in the registered office address, I diporting of this quange.	ree to ac e perform ed for in (hereby c	t in this cape ance of my Chapter 605 onfirm that	acity. I fur duties, and 5, F.S. Or, the limited	ther i I am if thi: liabi	agree to familia s docum lity com	comp r with ent is pany i	ly with and acc being fi has bee	the cept ìled n
Ki	gnatu	re of Revistered Agent								