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TALLAHASSEE FLORIDA

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COVER LETTER

Registration Section TO: Division of Corporations MANDINKA PROPERTIES, 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: Valentin Lopez Name of Person Firm/Company 2600 Douglas Road, suite 811 Address coral gables, fl 33134 City/State and Zip Code val@lopezpartners.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: valentin lopez 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 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.	1. Name of the limited liability company: MANDINKA PROPERTIES, LLC			
2.	(a)	Principal office address of limited liability company:		
		(Note: MUST BE STREET ADDRESS)	coral gables, fl 33134	
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2600 douglas road, suite 811 coral gables, fl 33134	
_	24/201		L13000012716	
3.	Dat	e of filing/registration in Florida	Document number	
5.	(a)	Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:	
		Registered Agent:	ARISTA, EDUARDO RESQ	
		Registered Office Address:	1401 BRICKELL AVENUE, SUITE 520	
			Miami, fl 33131	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			V Registered Office address:	
		NEW Registered Agent:	Valentin Lopez	
		NEW Registered Office Address:	2600 douglas road, suite 811	
		(MUST BE FLORIDA STREET ADDRESS)	coral gables, fl 33134	
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 Floridal imited 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 the initiation of the operating agreement of the limited liability company. Signature of a member or authorized representative of a member 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 608, R.S. Or, if his 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.				
Sij	/O	e of Registered Agent		

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