	questor's Name)	
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/A.J	d\	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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JUN 1 6 2014 R. WHITE

Atlantic 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.

Sincerely

Richard Soto, Accountant

Atlantic Gulf Property Investments

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJI	Atlantic Gulf Realty, LLC					
	Name of Limited Liability Company					
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Office	e Change and fe	ee(s) are submitted for filing.			
Please	return all correspondence concerning this	matter to the fo	llowing:			
Zahra	a S. Valiani					
			-			
	Name of Person					
Atlan	tic Gulf Realty, LLC					
	Firm/Company		-			
390 N	N ORANGE AVE., STE. 2125					
	Address		_			
ORLA	ANDO, FL 32801					
	City/State and Zip Code		_			
VALI	ANI.SALIM@GMAIL.COM					
E	-mail address: (to be used for future annua	al report notific	ation)			
For fur	ther information concerning this matter, p	lease call:				
ZAHF	RA S. VALIANI	407 at (	730-3969			
	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	Regi Divi: P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 thassee, Florida 32314			
	Enclosed is a check for the following amount:					
	<b>△</b> \$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:  Atlantic Gulf	Realty,	LLC			
2. (a)			o)			
( )	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ `	,	Mailing address of (Note: MAY BE	•	
	390 N Orange Ave., Ste 2125		390 N C	Orange Ave., S	Ste 2125	
	Orlando, Fl 32801	<del>_</del>	Orlando	, FI 32801		
	5/10/2013		L130000	68707		
3.	Date of filing/registration in Florida	_ 4.		Document num	nber	
5. (a)	Zahra S. Valiani					
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida	a Dept. of State	e:		
	7550 Futures Dr. Ste 102 Orlando FL32819	)				
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS	5)	<b>-</b>		
	7550 Futures Dr., Ste 102					
	Orlando	32819		_		
	·	<b>,</b>		-		
(b)	Zahra S. Valiani			<u>.</u>		*
	Enter name of NEW Registered Agent and/or NEW Registered	l Office ad	dress:		-	
	NEW Registered Office Address:			_		
	390 N Orange Ave., Ste 2125					1 ** <del>=</del>
				_	The second secon	-
	Orlando	32801			5	
	, rt			_		
	imited liability company is not organized under the la					
agent v	ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li	t the regi	stered office ompany, it i	e and the busine is hereby confirt	ess office of the med that the cl	e registered nange(s)
was/w	ere authorized by an affirmative vote of the members of the of organization or the operating agreement of the	of the lin	nited liabilit	ty company or as	s otherwise pr	ovided in
the art	icles of organization of the operating agreement of the		hra S. Val			
Signa	ture of a member of authorized representative of a member			Printed or typed r	name of signee	
provisi the obt to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to ac. e perform ed for in ( hereby c	t in this cap ance of my Chapter 60: onfirm that	pacity. I further duties, and I am 5, F.S. Or, if thi the limited liab	agree to comp n familiar with is document is ility company	oly with the and accept being filed has been
Signatu	fe of Registered Agent					

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