## CBPHCOOEIJ

(Requestor's Name)  (Address)	800260555018				
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	06/02/1401050017 **25.00				
Certified Copies Certificates of Status	JUN 16 2014  R. WHITE				

Office Use Only

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		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

Sincerely

Atlantic Gulf Property Investments

## **COVER LETTER**

**TO:** Registration Section

INHS18 (2/14)

Division of Corporations						
SUBJECT: ATLANTIC GULF PROPERTY MANAGEMENT, 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:						
SALIM N. VALIANI						
Name of Person						
ATLANTIC GULF PROPERTY MANAGEMENT, LLC						
Firm/Company						
390 N ORANGE AVE., STE 2125						
Address						
ORLANDO, FL 32801						
City/State and Zip Code						
VALIANI.SALIM@GMAIL.COM						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
SALIM N. VALIANI 407 730-3969						
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  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						

## 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. 1	lame of the limited liability company: ATLANTIC (	JULF P	ROPERTY	MANAGEMEI	VI, LLC		
2. (a	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  390 N Orange Ave., Ste. 2125	(		failing address of lim (Note: MAYBE PO	OST OFFI	CE BO	
	Orlando, Fl 32801		Orlando,	FI 32801		_	
	5/21/2013		L1300007	4487			
3.	Date of filing/registration in Florida	4.	]	Document numbe	er		
5. (a	չ Salim N. Valiani						
J. (c	Registered Agent and Registered Office shown on the records of 7550 Futures Dr., Ste 102 Orlando Fl 3281		a Dept. of State:	:			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>s)</u>				
	7550 Futures Dr., Ste. 102			:			
	Orlando , F	L_32819	)			4	
(b	Salim N. Valiani					-2 P.2:	
	NEW Registered Office Address:				1.3-	ದಾ	
	390 N Orange Ave., Ste. 2125						
	Orlando , F	. <sub>L_</sub> 32801					
the chagent was the are the ar	limited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the language of a member or authorized representative of a member eby accept the appointment as registered agent and assions of all statutes relative to the proper and completions of my position as registered agent as providing the reflect a change in the registered office address, and militing of his change.	of the regiliability control of the limited Sa	istered office ompany, it is nited liability liability comp lim N. Valia	and the business hereby confirmed company or as opany.  Printed or typed name of the confirmed or typed name of the confirme	office of d that the therwise	the rechan provi	egistered ge(s) ded in

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