

L140000 83269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

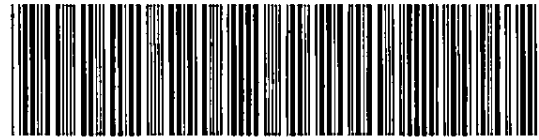
(Business Entity Name)

(Document Number)

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NOV 17 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 7433 Collins Ave 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:

Julie Medina
Name of Person

Claro Development Solutions, Inc.
Firm/Company

1035 North Miami Ave, #201
Address

Miami, FL 33136
City/State and Zip Code

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

For further information concerning this matter, please call:

Julie Medina at (305) 324.4700
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: 7433 Collins Ave Investment, LLC

2. (a) _____ Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) <u>1035 North Miami Ave, Suite 201</u> <u>Miami, FL 33136</u> <u>05.22.14</u>	(b) _____ Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) <u>1035 North Miami Ave, Suite 201</u> <u>Miami, FL 33136</u> <u>L14000083269</u>
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3. 05.22.14 Date of filing/registration in Florida 4. L14000083269 Document number

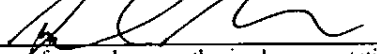
5. (a) Reinhard, Sanford N.
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Reinhard, Sanford N.
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1290 Weston Road, Suite 201
Weston, FL 33326

(b) Julie Medina
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
Claro Development Solutions, Inc.
 NEW Registered Office Address:
1035 North Miami Ave, Suite 201
Miami, FL 33136

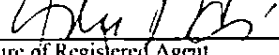
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 FILED
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

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.


 _____ Signature of a member or authorized representative of a member

Sandor Scher, Managing Member, JAMP Investments, L.P.
 _____ 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.


 _____ Signature of Registered Agent