150007590

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



400273838724

08/15/15--01034--022 **50.00

15 JULED # 52

JUN 1 6 2015 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: AC 704 LLC			
Nar	ne of Limited L	iability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Of	fice Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning the	nis matter to the	following:	
JORGE E. BLANCO			
Name of Person		<u> </u>	
JORGE E. BLANCO, P.A.			
Firm/Company			
782 NW 42 Ave., Suite 641			
Address		_	
Miami, Florida 33126			300 -
City/State and Zip Code			ECR.
jorgeblancolaw@bellsouth.net			
E-mail address: (to be used for future an	nual report notif	fication)	TARY OF ASSEE, 1
For further information concerning this matter	r, please call:		1187 PB 1
Jorge E. Blanco	305	444-0044	#: 52 #: 52
Name of Person		Area Code & Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	M Re Di P.G Ta		
Enclosed is a check for the following	g amount:		
☑ \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy	ı
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.

	me of the limited liability company: AC 704 LLC	ļ		
a) _	12727 N. Winners Circle	(_{b)} Same	
, -	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Davie, Florida 33330		,	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	April 22, 2015		L15000	070590
•	Date of filing/registration in Florida	4.		Document number
a)	Carlos Leon			
	Registered Agent and Registered Office shown on the records of	of the Flori	da Dept. of S	State ·
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRES	<u></u> .	
	12727 N. Winners Circle			
	Davie	_L 3333	0	5
- \	Jorge E. Blanco			三
o) .	Enter name of NEW Registered Agent and/or NEW Registere	ed Office a	ddress:	ILED Nassee
	782 NW 42 Ave			مغيبة بمريرة المتنا
	NEW Registered Office Address:			# 52 LORID
	Suite 641			<u> </u>
	Miami	_L 3312	6	
thai it w we	mited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	aws of the of the regulation of the limited	e State of sistered of company, mited liab l liability o	fice and the business office of the registers it is hereby confirmed that the change(s) ility company or as otherwise provided in company.
	Justaven	<u>Ca</u>	arlos Leo	
ereb visio obli nere	ure of member or authorized representative of a member by accept the appointment as registered agent and a good of all statutes relative to the proper and complet gations of my position as registered agent as providity reflect a change in the registered office address, in writing of this change	gree to a te perfort led for in I hereby	ct in this c nance of n Chapter (confirm th	Printed or typed name of signee apacity. I further agree to comply with the dividence of the property of the same

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