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TO: Registration Section
Division of Corporations

VS 6/1 INVESTM

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VS 6/1 INVESTMENT HOLDINGS LLC SUBJECT:						
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.					
Please return all correspondence concerning this matt	er to the following:					
Javed Rahman, Esq.						
Name of Person						
Rahman Le PLLC						
Firm/Company						
2030 S. Douglas Rd Suite 107						
Address						
Coral Gables, FL 33134						
City/State and Zip Code						
Javed@rahmanle.com						
E-mail address: (to be used for future annual rep	oort notification)					
For further information concerning this matter, please	call:					
Javed Rahman	305 542-0402					
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:						
2 \$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.

I. Na	VS 6/1 Invest	ment H	loldings LI	LC
2. (a)	1001 Brickell Bay Drive	1001 Brickell Bay Drive		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 3112	(0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 12
	Miami, FL 33131	_	Miami, F	L 33131
	07/07/2015		L1500011	6901
3.5. (a)	Date of filing/registration in Florida The Cantor Group Corporate Services LLC	4.		Document number
<i>J.</i> (a)	Registered Agent and Registered Office shown on the records of to 2601 South Bayshore Drive	he Florida	Dept. of State	· :
	Registered Office Address Suite 1800	DDRESS	<u> </u>	TALLES OF
	Miami .FL	33133		EC 2
(b)	Rahman Le, PLLC			FILE DA
()	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ado	iress:	[98] 2
	2030 S. Douglas Rd.			10A 06
	NEW Registered Office Address: Suite 107	_		
	Coral Gables, FL_	33134		
the cha agent w was/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of a vill be identical. Or, in the case of a Florida limited lia- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regis bility co f the lim: limited li	tered office mpany, it is ited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Signat	ure of a member of authorized representative of a member			Printed or typed name of signee
provision (he obli to mere	ny accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete i gations of my position as registered agent as provided by reflect a change in the registered office address. I h I in writing of this change	ee to act performa I for in C ereby co	in this capa ince of my a hapter 605, infirm that t	city. I further agree to comply with the huties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Signatus	e of Registered Agent			