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## **COVER LETTER**

TO: Registration Section Division of Corporations VS 5 INVESTMENT HOLDINGS LLC SUBJECT: 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: 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 report notification) For further information concerning this matter, please call: Javed Rahman 305 542-0402 at ( Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount:

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

**■** \$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.

VS 5 Investment Holdings LLC  1. Name of the limited liability company:				
2. (a)	1001 Brickell Bay Drive	1001 Brickell Bay Drive		
()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Suite 3112	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  Suite 3112		
	Miami, FL 33131	Miami,	FL 33131	
	08/07/2015	L15000	140342	
<ul><li>3.</li><li>5. (a)</li></ul>	Date of filing/registration in Florida The Cantor Group Corporate Services LLC	4.	Document number	
J. (a)	Registered Agent and Registered Office shown on the records of to 2601 South Bayshore Drive	the Florida Dept. of St	ate:	
	Registered Office Address Suite 1800	(DDRESS)	_ 필요 <b>되</b>	
(b)	Miami , FL	33133	DEC	
	Rahman Le, PLLC		ASSET	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		1 2 E	
	2030 S. Douglas Rd.		2 OI	
	NEW Registered Office Address: Suite 107	_	_	
	Coral Gables FL	33134		
the cha agent v was/we the arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o cles of organization or the operating agreement of the	the registered offinibility company, it fitted limited liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.  nan	
	ture of a member or authorized representative of a member	and the state	Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and agro ons of all statutes relative to the proper and complete igations of my position as registered agent as provided ely reflect a change in the registered office address. I h I in writing of this change.	ee to act in this ca performance of m I for in Chapter 60 iereby confirm tha	pacity. I further agree to comply with the values, and I am familiar with and accept 05, F.S. Or, if this document is being filed the limited liability company has been	
Signatu	re of Registered Agent			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25,00