L15000163121

(Requestor's Name)				
(Ad	dress)			
(Address)				
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	y/State/Zip/Phone	- 		
(Cit	y/3@le/Zip/Phone	z #)		
☐ PICK-UP	☐ WAIT	MAIL		
	□			
(Bu	siness Entity Nan	ne)		
(Do	cument Number)	_		
Certified Copies	Certificates	of Status		
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		- <u></u> -		
Special Instructions to	Filing Officer:			





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JAN 28 2021

COVER LETTER

	Registration Section Division of Corporations					
SUBJE	ATLANTIC JJJ STRUCTURED PE	ATLANTIC JJJ STRUCTURED PROPERTIES TEAM, LLC				
SOBJE.		Name of Limited Liability Company				
Dear Sir	r or Madam:					
The enc	losed Registered Agent/Registered Of	fice Change an	d fee(s) are submitted for filing.			
Please r	eturn all correspondence concerning the	nis matter to th	e following:			
JULIE Z	APP					
	Name of Person					
	Firm/Company					
2900 NE	30TH STREET, 8M					
	Address					
FORT L	AUDERDALE, FL 33306					
	City/State and Zip Code					
STEVEZ	ZAPP@SBCGLOBAL.NET					
E-	mail address: (to be used for future an	nual report not	ification)			
For furt	her information concerning this matter	, please call:				
STEVE	ZAPP	626 at (658-6638			
	Name of Person		Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following	g amount:				
	S25 Filing Fee	٥	\$55 Filing Fee & Certified Copy			

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.

1. Na	ame of the limited liability company:ATLANTIC JJJ	STRUC	TURED PRO	PERTIES TEAM, LLC
2. (a)			(b)	
• ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		. /	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2900 NE 30TH STREET, 8M		2805 E. C	DAKLAND BLVD
	FORT LAUDERDALE, FL 33306		FORT LA	AUDERDALE, FL 33306
	09/24/2015		L15000163	(12)
3.	Date of filing/registration in Florida	— 4.		Document number
_	JULIE ZAPP	٦.		Document number
5. (a)	Registered Agent and Registered Office shown on the records o	Tthe Flor	ida Dept, of Sta	ـــ nte:
				- 450 0.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 3023 SW 51ST STREET			DE DEC LA TINE
	FORT LAUDERDALE . F	L ³³³¹²		1 星 0
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			- 平流 8
	the water of the same of the s	A THIE		
	NEW Registered Office Address:			<u> </u>
	2900 NE 30TH STREET, 8M			
	2,00 (1) 30 (1) 31 (1) 11 (1)		···-	_
	FORT LAUDERDALE F	L_33306		_
change agent v was/wa the arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lierc authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registe iability of the li	ered office as company, it imited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	Milit. Zappt thre of a member of authorized representative of a member	Ju	lie Zapp	
				Printed or typed name of signee
понцие	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It is writing of this change.	pree to a 2 perfori ed for in hereby	ct in this cap mance of my Chapter 60 confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signatu	Mile Japa			