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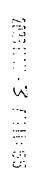
| (Requestor's Name)                      |  |  |  |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |  |  |
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Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations ALEXANDRIA INVESTMENT 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: Gerardo Machado Name of Person ALEXANDRIA INVESTMENT LLC Firm/Company 1701 WEST 37 STREETBAY 9 Address HIALEAH, FL 33012 City/State and Zip Code jerry@decoraeventrentals.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Gerardo Machado Area Code & Daytime Telephone Number Name of Person **Street Address: Mailing Address:** Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303 Enclosed is a check for the following amount: ☐ \$55 Filing Fee & Certified Copy ■ \$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.

| 1.                            | Na   | me of the limited liability company:  ALEXANDRIA II   | NVESTA  | MENT LLC  |  |  |  |
|-------------------------------|--|---|---|---|--|--|--|
| 2. (                          |  | 1701 WEST 37 STREETBAY 9HIALEAH, FL 33012   |   | b)  |  |  |  |
| (                             | <i>)</i>   | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  | (   | ~) <u>———</u>   | Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  |  |  |
|                               |  | 1701 WEST 37 STREETBAY 9  |   |   |  |  |  |
|                               |  | HIALEAH, FL 33012   | _   |   |  |  |  |
|                               |  | 01/06/2016  |   | L16000002   | 199  |  |  |
| 3.                            |  | Date of filing/registration in Florida  | 4.  |   | Document number  |  |  |
| 5. (                          | (a)  | BERTHA DIEGUEZ  |   |   |  |  |  |
| J. ,                          | ,  | Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  |   |   |  |  |  |
|                               |  |   | -   |   |  |  |  |
|                               |  | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1701 WEST 37 STREETBAY 9   |   |   |  |  |  |
|                               |  |   |   |   | - ~  |  |  |
|                               |  | HIALEAH   | 33012   |   |  |  |  |
| ,                             |  | GERARDO MACHADO   |   |   |  |  |  |
| (                             | b)   | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>  | Office ac                                     | ldress:   | - ພໍ່  |  |  |
|                               |  |   |   |   |  |  |  |
|                               |  |   |   |   |  |  |  |
|                               |  | NEW Registered Office Address:  |   |   | \$5<br>5   |  |  |
|                               |  | 1701 WEST 37 STREETBAY 9  |   |   | _  |  |  |
|                               |  | HIALEAH , FL  | 33012   |   | _  |  |  |
| char<br>ager<br>was           | ige<br>it w<br>/we   | imited liability company is not organized under the law<br>or changes are made, the Florida street address of the<br>vill be identical. Or, in the case of a Florida limited lia<br>ere authorized by an affirmative vote of the members of<br>cles of organization or the operating agreement of the   | register<br>bility co<br>of the lin           | ed office an<br>ompany, it is<br>nited liabilit           | d the business office of the registered<br>is hereby confirmed that the change(s)<br>y company or as otherwise provided in<br>inpany.  |  |  |
| - 5:                          |  |   |   |   | GERARDO MACHADO  |  |  |
| I he<br>prov<br>the c<br>to m | rel<br>isi<br>obli<br>ere  | nure of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of myposition as registered agent as provided ely reflect a change in the registered office address, I have in a provided in a provided of the change in the registered office address. I have the provided of this change. | ee to ac<br>perform<br>I for in (<br>nereby c | t in this cap<br>ance of my<br>Chaptèr 603<br>onfirm that | Printed or typed name of signee acity. I further agree to comply with the duties, and I am Jamiliar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been |  |  |
| Sign                          | atu  | re of Registered Agent  |   |   |  |  |  |
|                               | Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 |   |   |   |  |  |  |

**FILING FEE: \$25.00** 

INHS18 (2/14)