

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

Office Use Only



300306091573

12/01/17--01010--017 **700.00

D SCOTT DEC 4 2017

COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Division of Corporations Acercruz Investments 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: z.bolanos@amicorp.com Name of Person Amicorp Corporate Services LLC Firm/Company 1001 Brickell Bay Drive, Suite 2908 Address Miami, FL 33131 City/State and Zip Code vl_usasupport@amicorp.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Zully Bolanos Area Code & Davtime Telephone Number Name of Person MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 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. N	ame of the limited liability company: Acercruz Inve	estments LLC	
2. (a)	1001 Brickell Bay Drive	(b) 1001 Brickell Bay Drive	
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Suite 2908	Suite 2908	
	Miami, FL 33131	Miami, FL 33131	
	12/23/2014	11600146327	
3.	Date of filing/registration in Florida	4. Document number	
5. (a)	Amicorp Fiduciary Services LLC		
. (4,	Registered Agent and Registered Office shown on the records of	the Florida Dept. of State:	
	1001 Brickell Bay Drive		
	ADDRESS)		
	Suite 2908		
	Miami	33131	
		'	
(b) Amicorp Corporate Services LLC			
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
	1001 Brickell Bay Drive		
	NEW Registered Office Address:		
	Suite 2908	-	
	Miami	33131	
	, †L	,	
the cha agent v was/wa	ingo or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie	vs of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in limited liability company.	
	- Not	Maria Claudia Soruco Cardenas	
	ture of a member or authorized representative of a member	Printed or typed name of signee	
the obj to mer notifie	by accept the appointment as registered agent and agrions of all stanties relative to the proper and complete to the proper and complete to gattons of my position as registered agent as provided by reflect p change in the registered office address, I do not this change.	ce to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept a for in Chapter (1)5, F.S. Or, if this document is being filed nereby confirm that the limited hability company has been	