

L18000020316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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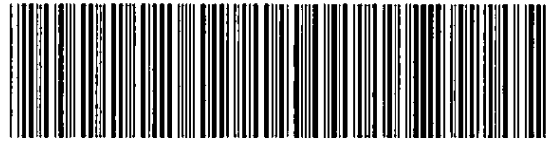
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** C&M Property Investments Two, LLC  
\_\_\_\_\_  
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:

Jose M. Canas  
\_\_\_\_\_  
Name of Person

Jose M. Canas, P.A.  
\_\_\_\_\_  
Firm/Company

13350 SW 131 Street, Suite 106  
\_\_\_\_\_  
Address

Miami, Florida 33186  
\_\_\_\_\_  
City/State and Zip Code

canaslaw@bellsouth.net  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jose M. Canas, Esq. at ( 305 ) 666-9697  
\_\_\_\_\_  
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 amount:**

- \$25 Filing Fee                       \$55 Filing Fee & Certified Copy

RECEIVED  
DIVISION OF CORPORATIONS  
MAY 13 2008

**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. Name of the limited liability company: C&M Property Investments Two, LLC

2. (a) 6511 SW 122 Street, Pinecrest, FL 33156 (b) 6511 SW 122 Street, Pinecrest, FL 33156  
 Principal office address of limited liability company: Mailing address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)* *(Note: MAY BE POST OFFICE BOX)*

3. January 19, 2028 4. L18000020316  
 Date of filing/registration in Florida Document number

5. (a) Jose M. Canas, P.A.  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
9780 E. Indigo Street, Suite 101, Palmetto Bay, FL 33157

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
 \_\_\_\_\_  
 \_\_\_\_\_, FL \_\_\_\_\_

(b) \_\_\_\_\_  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:  
13350 SW 131 Street, Suite 106  
 \_\_\_\_\_  
Miami, FL 33186

2028  
 JAN 19 3:08 PM  
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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Mary Black-Suarez Signature of a member or authorized representative of a member  
Mary Black-Suarez Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Jose Canas  
 Signature of Registered Agent