<u>L180000 70820</u>

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SECNLIANN OF STATE
JALLAHASSEE, FLORIDA

JUN 1 9 2018

S. YOUNG

COVER LETTER

Registration Section

TO:

INHS18 (2/14)

1714	rision of Corporations						
SUBJECT:							
	Name	of Limit	ed Liat	ility Company			
Dear Sir or	Madam:						
The enclose	ed Registered Agent/Registered Offic	e Change	and fe	c(s) are submitted for filing.			
Please retur	n all correspondence concerning this	matter to	the fo	llowing:			
	ERHAN SAKAOGLU, ESQ						
***	Name of Person						
	N/A						
	Firm/Company	,		•	1 2 S		
	5063 MADISON LAKES CIR	t. W		;	至重型		
	Address				ASSECTION OF LAND OF L		
	DAVIE, FLORIDA 33328-452	27			OF STATE		
	City/State and Zip Code				8: 1: ORIO		
ERHAN@SAKALAW.COM					D . +		
E-mail	address: (to be used for future annua	al report	notifica	tion)			
For further i	information concerning this matter, p	lease cal	l:				
	ZEE LAKHA	at (954	600-7422			
	Name of Person	- \	,	\rea Code & Daytime Teleph	ione Number		
Reg Divi Clit 266	REET/COURIER ADDRESS: istration Section ision of Corporations ton Building I Executive Center Circle ahassee, Florida 32301.		Regis Divis P.O. I	tration Section , ion of Corporations , Box 6327 , massee, Florida 32314			
Enc	losed is a check for the following a	mount:					
2 S	25 Filing Fee	C	□ \$55	Filing Fee & Certified Copy			

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: DENIZ INVEST	MENTS LLC		
2.	(a)		(b)		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAYBE POST OFFICE BOX)	
		1300 BRICKELL BAY DR. UNIT 3304	1300 B	RICKELL BAY DR. UNIT 3304	
		MIAMI, FL 33131		MIAMI, FL 33131	
		MARCH 19, 2018		L18000070820	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	ERHAN SAKAOGLU		_ 乳 型 3	
	(,	Registered Agent and Registered Office shown on the records of the ERHAN SAKAOGLU	: Florida Dept. of Sti	ne: : EB = m	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		2701 WEST OAKLAND PARK BLVD. UNIT 4	05	N 18 P	
		OAKLAND PARK .FL	33311	FLORID	
		Enter name of NEW Registered Agent and/or NEW Registered O NEW Registered Office Address: 1300 BRICKELL BAY DR. UNIT 3304		_	
		MIAMI , FL	33131		
the age was	cha nt w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization of the operating agreement of the li	ic registered officility company, it the limited liabili	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in	
Signature of a member or authorized representative of a member			Printed or typed name of signee		
I h pro the to n not	ereh vista obli nere iftea	by accept the appointment as registered agent and agree into of all statutes relative to the proper and complete pagations of my position as registered agent as provided if y reflect a change in the registered office address. I he in writing of this change. The of Registered Type Division of Corporations P.O. Bo	erformance of my or in Chapter 60 reby confirm tha	pacity. I further agree to comply with the eduties, and I am familiar with and accept 15, F.S. Or, if this document is being filed to the limited liability company has been	

FILING FEE: \$25.00