## LZ000 175390

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SECRETARY OF STATE

## COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	AJ & AJ Property Holdings, LL	C.					
		Name of Limited Liability Company					
Dear Si	r or Madam:						
The enc	losed Registered Agent/Registered	Office Change an	d fee(s) are submitted for filing				
Please r	eturn all correspondence concernin	g this matter to the	e following:				
Joseph A	A. Carballo						
	Name of Person		<del></del>				
Carballe	Law, PA.		2824 1824				
	Firm/Company	<u> </u>	— FACE THE				
2655 S I	Le Jeune Rd, Suite 532		2021 HAY 20 PH 2: 32 SECRETARY OF STATE SECRETARY SEE, FL				
	Address		—				
Coral G	ables, FL 33134		: 32				
	City/State and Zip Co	de	<del></del>				
joe@car	ballolaw.com						
E-	mail address: (to be used for future	annual report noti	fication)				
For furt	her information concerning this ma	atter, please call:					
Joseph /	A. Carbalto	305 at (	673-8300				
	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, F1, 32303				
	Enclosed is a check for the follow	ving amount:					
	■ \$25 Filing Fee		SSS 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: AJ & AJ Property	Holdin	gs. LLC	
2. (a)	2655 S Le Jeune Rd, Suite 532	(b) 2655 S Le Jeune Rd. Suite 532		
<b>-</b> . ()	Principal office address of limited liability company: ( <u>Note; MUST BE STREET ADDRESS</u> )	<u> </u>	` '	Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Coral Gables, FL 33134	_	Coral Gable	es, FL 33134
	06/23/2020	_	L200001753	90
3.	Date of filing/registration in Florida Carballo Law, PA.	4.		Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 2355 Salzedo St			
	Registered Office Address	<u>IDDRE.</u>	<u>((()</u>	PAMAY 20 PH 2 SECRETARY OF SECRETARIAS SEE
	Coral Gables, FL	33134		PH 2:
(b)	Carballo Law, PA.  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 2655 S Le Jeune Rd	Office ;	ddress:	THE 32
	NEW Registered Office Address: Suite 532			
	Coral Gables, FL	33134		
change agent v was/we the arti Signa I here, provisi the obl to mere	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agreeing of all statutes relative to the proper and complete pligations of my position as registered agent as provided by reflect a change in the registered office address. In this change	registe bility of the li limited —	red office and ompany, it is mited liability liability com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  A. Corlalle  Frinted or typed name of signee  activ. I further agree to comply with the
	re of Registered Agent			