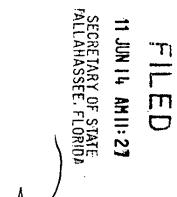
1 030000 1421

	(Requestor's Name)	
	(Address)	
,	(Address)	
	(City/State/Zip/Phone #)	
PICK-UI	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	s to Filing Officer:	
		(14)
	Office Use Only	



100208262501

06/02/11--01014--003 **70.00



J. BRYAN

JUN 15 2011

EXAMINER



June 3, 2011

YVETTE WRIGHT AMERICA'S CAPITAL PARTNERS, LLC 3225 AVIATION AVENUE, SUITE 601 COCONUT GROVE, FL 33133

SUBJECT: ACP FLORIDA INVESTMENT FUND I LLC

Ref. Number: M03000001421



We have received your document for ACP FLORIDA INVESTMENT FUND I LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 211A00013626

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ACP Florida Investment Fund I, 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:
Yvette Wright Utame of Person
America's Capital Partners, LLC Firm/Company America's Capital Partners, LLC Firm/Company
3225 Anichion Ave Ste 601 Address Address
Coconut Grave FL 33133 City/State and Zip Code
Vwnght e amenicas capital com /E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Agnes Arcia at (305) 995-998 Name of Person at (305) Arca Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$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 608.416 or 608.508, 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: _;	ACP Florida	Investment	Fund I,	<u>, L</u> L	<u>c</u> _
2. (a)	Principal office address of limited lia	bility company:	444 Bri	ckell A	ve.	
	(Note: MUST BE STREET ADDR	ESS)	Suite 90 Jiami, Fi 3	0 313/		
(b)	Mailing address of limited liability co	ompany:	3225 F	triction	Ave	nue
	(Note: MAY BE POST OFFICE B	<u>ox</u>)	Suite 6	01 FL 331	33	
	5/5/2003 te of filing/registration in Florida		63 000 00/9			
	Registered Agent and Registered Off			la Dept. of S	state:	
	Registered Agent:	C	T Corporat	4m		
	Registered Office Address:	<u> </u>	200 South Fl Vantation, Fl	ine 15/4 3332	nd /	<u> </u>
(b)	Enter name of <u>NEW Registered Age</u> <u>NEW Registered Agent:</u> NEW Registered Office Address:		egistered Office ac Sergio Socols 225 Anathon	sky		
	NEW Registered Office Address: (MUST BE FLORIDA STREET AL		Suite 601 conut Grove		331	<u>3</u> 3
confir and the liability of the or the Printed	limited liability company is not organimed that after the change or changes are business office of the registered agery company, it is hereby confirmed that members of the limited liability company operating agreement of the limited liability company agreement of the limited liability company. The organization of the limited liability company agreement of the limited liability company of the limited liability company agreement of the limited liability company. The organization of the limited liability company is not specifically agreed the provisions of all statutes related the limited liability company. It is not specifically agreed the limited liability company in the limited liability company in the limited liability.	re made, the Floridat will be identical the change(s) was any or as otherwise bility company.	of the State of Flor la street address of the Or, in the case of some solution of the provided in the art	the registered a Florida lim y an affirmaticles of LAHASSEE, FLORE FLORE IN THE PROPERTY OF STATE OF S	d officiated tive venication	ote ion
A	Division of Cornerations	s. P.O. Box 6327	Tallahassee, FL 32	2314		

FILING FEE: \$25.00