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(((H10000063221 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: AGI REGISTERED AGENTS, INC. Account Name

Account Number : 120000000205

: (305)416-6800

Fax Number

: (305)416-6811

\*\*Enter the email address for this business entity to be used for future annual report mailings, Enter only one email address please. \*\*

COR AMND/RESTATE/CORRECT OR O/D RESIGN JOINT PROPERTIES CORP.

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## COVER LETTER .

	menament Section ivision of Corporations	
SUBJECT	r: JOINT PROPERTIES	CORP.
	Name of Corporati	on
DOCUMI	ENT NUMBER: M4322	28
The enclos	sed Statement of Change of Registered Office/Agent	and fee are submitted for filing.
Please retu	urn all correspondence concerning this matter to the	following:
	Diane Hernand Name of Contact Pe	ez
	Name of Contact Pe	rson
	Adams Gallinar,	P.A.
	Firm/Company	
	1000 Brickell Avenue,	Suite 300
	Address	
	Miami/Florida 33 City/State and Zip C	131 Code
	dhernandez@agilav	, com
	E-mail address: (to be used for future a	nnual report notification)
For further	r information concerning this matter, please call:	
	Diane Hernandez at (	305 416-6800 Area Code & Daytime Telephone Number
	Name of Contact Person	rea Code & Daytime Telephone Number
Enclosed i	is a \$35.00 check made payable to the Department of	State.
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations

CR2E045 (8/05)

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

3054166811

4100000 634213

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTEREI**HIQEOU) 682 29 OTH** FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: JOINT PROPERTIES CORP.	
2. The principal office address: 1000 Brickell Avenue, Suite 300, Miami, Florida 33131	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 12/15/1986 Document number: M43228	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Klein Mendez & Rothbard, LLC	
8370 West Flagler Street, Suite 234	
Miami, Florida 33144	
Miami, Florida 33144  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	2 0
AGI Registered Agents, Inc.	H
1000 Brickell Avenue, Suite 300	C
P.O. Box NOT acceptable	
Miami, Florida 33131	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the toard, or the corporation has been notified in writing of the change.	
JOSE BUSQUETS, PRES.	
Signature of an officer or director Printed or typed name and title	
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 amfamiliar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
NOUN 3/19/10	
Senature of legistered gent Date	
If signing on behalf of an entity:	
KOBERT K. ADAMS Typed or Printed Name	

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)