L00000013470

Reynolds

Certified Public Accountants

4501 N. Tamiami Trail, Ste. 212

Naples, FL 34109

400005506464---2 -05/13/02--01071--016 *****25.00 ******25.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy ■ Walk in ☐ Pick up time ☐ Photocopy Certificate of Status ☐ Will wait ■ Mail out **NEW FILINGS AMENDMENTS** ■ Profit Amendment Not for Profit Resignation of R.A., Officer/Director Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Foreign Annual Report Fictitious Name Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

J. BRYAN MAY 2 U 2002

Examiner's Initials

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. The name of the limited liability company is: AVENIR INTERNATIONAL LLC.
2. The mailing address of the limited liability company is: 21456 PEZICAN SouND DR.
Unit 201 ESTERO, FL. 33128
16/31/2000 3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Scott DuvAL, MORRISON & Conroy, V.H. Name
Scott Duval, Morrison & Conroy, P.A. Name 3838 TAMIAMI TRAIL NORTH, Swite 402 Address
Naples, FL. 34/03 City, State and Zip
6. The name and address of the new registered agent and/or office:
6. The name and address of the new registered agent and/or office: Nancy Reynolds, Reynolds associates
6. The name and address of the new registered agent and/or office: Nancy Reynolds, Reynolds associates Name 8955 Fontana DEZ SOL WAY Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
Naples FL 34109 City, State and Zip
City, State and Zip
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.
(Signature of a member or authorized representative of a member)
BRUCE E. KomAN (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 auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, 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.
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

FILING FEE: \$25.00