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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : 120100000062 : (888)705-7274 Fax Number : (888)706-7274

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

Email	Addr	ess:			_		

LLC REGISTERED AGENT CHANGE AVH REALTY, LLC

Certificate of Status	0
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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: AVH REALTY, 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:

Mary Castillo	
Name of Person	
Registered Agent Solutions, Inc.	
Firm/Company	
Corporate Center One, 5301 Southwest Pkwy	, Ste 400
Address	
Austin, TX 78735	
City/State and Zip Code	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please of	call:

Mary Castillo 888 705-7274

Name of Person

Area 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 & 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.

I. N	ame of the limited liability company:	REALTY	, LLC					
2. (a)	4900 NORTH SCOTTSDALE	ROAD	_(b) 4900 N	NORTH SC	OTTSDA	LE R	OAD	
(4)	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	SUITE 2000		SUITE 2000					
	SCOTTSDALE, AZ 85251		SCOT	TSDALE,	AZ 852	51		
	1/31/2012		L12000	0014766				
3.	Date of filing/registration in Florida	4.		Document nun	nber			
5. (a	, NRAI SERVICES, INC							
•	Registered Agent and Registered Office shown on the re	cords of the Flor	ida Dept. of Stat	le:				
	1200 SOUTH PINE ISLAND							
	Registered Office Address (MUST BE FLORIDAS	_	FALSE	2022				
	PLANTATION	ANTATION _{FL} 33324				2022 JAN 12	-13	
(b	Registered Agent Solutions, I	Inc.		_	HE DARY O	12 1	FILED	
(-,	Enter name of NEW Registered Agent and/or NEW Re		75	*				
	155 Office Plaza Dr.	_	EE. FLORIDA	MH 11: 08				
	NEW Registered Office Address:							
	Suite A			_				
	Tallahassee	. FL 323	01	_				
If the	limited liability company is not organized under tange or changes are made, the Florida street ad-	r the laws of t dress of the re	he State of Fl gistered offic	lorida, it is herel	by confirmed ess office of	d that a	ifter gistered	

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.

/s/	Jaclyn Wright	Jaclyn Wright	Assistant Secretary
_	Ci man and Ca manufacture and and a manufacture of a manufacture	Deinted or	turned come of ciarres

Signature of a member or authorized representative of a member

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, 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.

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent