(f	Requestor's Name)
(/	Address)
(/	Address)
((City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
1)	Document Number)
Certified Copies	Certificates of Status
Special Instructions to F	Filing Officer:

Office Use Only



100415231831

2023 SEP -7 PM 1: 03

7

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street

CERTIFIED COPY
XX PLAIN STAMPED COPY

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000195				
	REFERENCE	:	973906 4702	973			
	AUTHORIZATION	:	Squel Hen	ran_	ر		
	COST LIMIT	:	\$ 25.00				
ORDER DATE :	September 6, 202	3					-
ORDER TIME :	8:22 AM						
ORDER NO. :	973906-005			7	350	30.7.1 10.7.1	e==17 2 0
CUSTOMER NO:	4702973			ALLAI	RETA	SEP -	
	<u>CHANGE OF A</u>	GEN	<u>T</u>		RY OF STATE	7 PH 1:03	
NAME:	AVANTI DUBILL	IN	TERESTS ASLA				
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FILING:				

EXAMINER:

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

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: AVANTI DUB	ILL INTER	ESTS ASL	A I, LLC		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability comparts (Note: MAY BE POST OFFICE BOX)			
	923 N. PENNSYLVANIA AVENUE	923 N. F	PENNSYLVANIA AVENUE			
	WINTER PARK, FL 32789		WINTER	R PARK, FL 32789		
	08/24/2023		L2300039	99685		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)						
J. (a)	Registered Agent and Registered Office shown on the records	of the Florida	a Dept. of Sta	 ite:		
	DUBILL, ANDREW J					
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	<u> </u>	_		
	923 PENNSYLVANIA AVENUE			20 7		
	WINTER PARK I	32789		PIL. 1 2023 SEP -7 SECRETAR TALLAHA		
				TARY OF AHASSEE		
(b)						
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	<u>red Office ad</u>	ldress:	SEE S		
	Corporation Service Company			PH 1: 03		
	NEW Registered Office Address:					
	1201 Hays Street			_		
	Tallahassee I	FL_32301		_		
change agent v was/we	imited liability company is not organized under the learn changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	he registere liability co s of the lim	ed office ar ompany, it nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in		
	Andrew Dubill	And	rew Dubill	Authorized Person		
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee		
provisi the obl to mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and complet igations of my position as registered agent as provia ly reflect a change in the registered office address, I in writing of this change.	gree to act te performa led for in C I hereby co	in this cap ance of my Chapter 60, onfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or. if this document is being filed the limited liability company has been		
,,	Drace C. Kubi	GRA	CE E KIR	BY, ASST. VICE PRESIDENT		
Signatu	re of Registered Agent					