

P07 000084529

For the Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : BARNETT, BOLT, KIRKWOOD, LONG & KOCHER,
Account Number : 072731001155
Phone : (813) 253-2020
Fax Number : (813) 251-6711

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

Email Address: _____

REGISTERED AGENT CHANGE
AVENUE COMMERCIAL GP, INC.

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Estimated Charge	\$35.00

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Corporate Filing Menu

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H15000248635

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH 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: Avenue Commercial GP, Inc.
2. The principal office address: 833 34th Avenue S.E.
Calgary, Alberta 2TG 4Y9, Canada
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7/26/2007 Document number: P07000084529

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)

Samuel L. Leprell1930 San Marco Boulevard, Suite 201Jacksonville, FL 32207

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

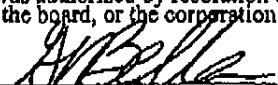
Craig E. Behrenfeld601 Bayshore Boulevard, Suite 700

P.O. Box NOT acceptable

Tampa, FL 33606

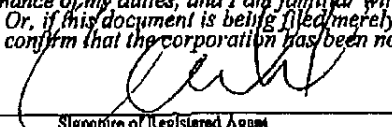
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical:

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


 Signature of an officer or director
Garry Bobke, President

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 am familiar 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.


 Signature of Registered Agent
10/16/15

Date

If signing on behalf of an entity:

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

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