## F0200000361

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

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SUBJECT: AdvanTech Solutions VI, Inc. (Name of corporation)	n)	······································	
DOCUMENT NUMBER: F0200000361	····	<u> </u>	• • • • • • • •
The enclosed Statement of Change of Registered Office/Age	nt and fee are subm	itted for filing.	
Please return all correspondence concerning this matter to the	e following:		
Angelina Browne (Name of person)	• • <u></u> •		
AdvanTech Solutions_VI, Inc. (Name of firm/company)	· <u></u> · ·	· •	_ ·
1410 N. Westshore Blvd., Suite 600	- <u></u> -		···
Tampa, FL 33607-4532 (City/state and zip code)	7		
For further information concerning this matter, please call:			

Angelina Browneat ( 813 ) 207-8582(Name of person)(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

## 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 <u>North Carolina</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: <u>AdvanTech Solutions VI, Inc.</u>

2. The principal office address: 1410 N. Westshore Blvd., Suite 600, Tampa, FL 33607-4532

3. The mailing address (if different): Same as above

- 4. Date of incorporation/qualification: Aug 27, 1987 Document number: F02000000361
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Brian Nugent 1410 N. Westshore Blvd., Suite 600 Tampa, FL 33607-4532

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

David D. Volpi

1410 N. Westshore Blvd., Suite 600 (P.O. Box or personal mailbox NOT acceptable)

Tampa, FL <u>33607-4532</u>

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.

er, chairman or vice chairman (Signature

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 Register vent)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314