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P.A. Change C.COULLIETTE

FEB 14 2011

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE: 665589 7817058

AUTHORIZATION :

COST LIMIT :

ORDER DATE: February 4, 2011

ORDER TIME : 9:15 AM

ORDER NO. : 665589-010

CUSTOMER NO: 7817058

CHANGE OF AGENT

NAME: ADVENTECH, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation of	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Colorado egistered agent, or both, in the State of Florida.	
1. The name of	the corporation: ADVENTECH, I	NC.	
2. The principal	office address: 2957 Wyendt St.,	Denver, CO 80211	
3. The mailing a	address (if different): P.O. Box 126	24, Denver, CO 80212	
4. Date of incor	poration/qualification: 01/04/2010	Document number: F10000000137	
	d street address of the current registe riment of State:	red agent and registered office on file with the	
	NRAI Services, Inc.	·	
	2731 Executive Park Dr., Suite	4	
	Weston FL 33331		E C
6. The name and (if changed):	d street address of the new registered	agent (if changed) and /or registered office	CALLAH ASSE
	Corporation Service Company		ζ.
	1201 Hays Street		
	(P.Q. Box NOT acce	ntable)	
		reet address of the business office of its registered a opted by its board of directors or by an officer so in notified in writing of the change.	igent,
	out of the software that so	I have I drope of dear	Cient
	ure of an officer or director)	(Printed or typed name and nile)	100
of my duties, an document is bei corporation has Corporati	the appointment as registered age, to comply with the provisions of all an I am familiar with and accept the ing filed merely to reflect a change is been notified in writing of this choon Service Company	nt and agree to act in this capacity, statutes relative to the proper and complete perform obligation of my position as registered agent. Or, in the registered office address, I hereby confirm than the confirmation of the conf	nance if this at the
By:	gnature of Registered Agent)	(Date)	
lf signing on be	shalf of an entity:		
Sylvia Quepp	et, Asst. VP		
{ 7	Typed or Printed Name)		

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