

(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: AJA Packing Ventu	ıres, Inc	\ * •	
Na	ime of Corporat	ion	
DOCUMENT NUMBER:			
The enclosed Affidavit by Foreign Corporation submitted for filing.	n to Change/A	dd Officer(s) and/or Director(s) and fee are
Please return all correspondence concerning this	s matter to the	following:	
Andrew J. Ahrens			
Name of Contact Person			
AJA Packing Ventures, In	IC.		
Firm/Company			(
7800 Drew Circle #14			
Address			
Fort Myers, FL 33967			
City/State and Zip Code			
andy.ahrens@gonavis.co	m		
E-mail address: (to be used for future annual re		<u>n)</u>	
Und Combine in Comment	1 11		
For further information concerning this matter,	•		
Andrew J. Ahrens	(262)	391-46	67 phone Number
Name of Contact Person	Area Code &	Daytime Tele	phone Number
Enclosed is a check made payable to the Florida	a Department o	of State for ti	he following amount:
\$35.00 Filing Fee \$ \$43.75 Filing Fee & Certificate of Status	S43.75 Fil Certified ((Additional enclosed)	Copy al copy is	\$52.50 Filing Fee. Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division (Clifton B 2661 Exe	ent Section of Corporati	er Circle



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first of	calendar year of qualification)
 The name of the foreign corporation as it appears on t AJA Packing Ventures, Inc. 	he records of the Florida Department of State is:
2. This entity was authorized to transact business in Flor number is F18000002547	
3. This corporation was formed under the laws of Wisc	onsin
4. The name and address of each officer and/or director i	
<u>Title:</u> President	Name and Address Andrew J. Ahrens
	21717 Baccarat Lane #201
	Estero, FL 33928
Treasurer	Wendy E. Ahrens
	21717 Baccarat Lane #201
	Estero, FL 33928
	127 127 1288
(Attach additional pages i	f necessary)
1218/2	President 5 5 5
ature of an officer or director	Title of person signing

Typed or printed name of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to: Division of Corporations • PO Box 6327 • Tallahassee, FL 32314