

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90582 005 ****50.00

DOCUMENT # L02000009205

1. Entity Name

AVA INNOVATIONS, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4625 SW 20TH AVENUE

Suite, Apt. #, etc.

3. Mailing Address

4625 SW 20TH AVENUE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

CAPE CORAL, FL

City & State

CAPE CORAL, FL

4. FEI Number

94-1687665

Applied For

Not Applicable

Zip - Country

33914-6256

Zip - Country

33914-6256

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

JOSEPH BARTLETT

Street Address (P.O. Box Number is Not Acceptable)

4625 SW 20TH AVENUE

City

CAPE CORAL

FL

Zip Code
33914

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME JOSEPH A. BARTLETT
STREET ADDRESS 4625 SW 20TH AVENUE
CITY - ST - ZIP CAPE CORAL, FL 33914

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Joseph A. Bartlett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER,
OR AUTHORIZED REPRESENTATIVE

4/30/03 *229-8825*
Date **Daytime Phone #**