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SECRETARY OF STATE DIVISION OF CORPORATIONS

TO: Registration Section Division of Corporations  SUBJECT: ADVANTAGE INDUSTRIES LLC (Name of Limited Liability Company)  Dear Sir or Madam:  The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:    Grand New Area   Industries   Llc	C	OVER LETTER
Dear Sir or Madam:  The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  GLONN MONTH (Name of Person)  AOVANTAGE TROUSTRIES LLC  (Firm/Company)  21997 US 19 NORTH  (Address)  CLEARWATEN FL 33765  (City/State and Zip Code)  For further information concerning this matter, please call:  (Name of Person)  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  GLENN NEWHAN (Name of Person)  AOVANTAGA INDUSTRIES LLC  21997 US 19 NORTH (Address)  CLEARWATEN, FL 33765  (City/State and Zip Code)  For further information concerning this matter, please call:  GLENN NEWHAN at (813) 600 - 5022 (Name of Person)  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:	SUBJECT: ADVANTAGE (Name of L	INDUSTRIES LLC imited Liability Company)
Please return all correspondence concerning this matter to the following:  GLENN NEWMAN (Name of Person)  AOVANTAGE INDUSTRIES LLC (Firm/Company)  21997 US 19 NORTH (Address)  CLEARWATEW FL 33765 (City/State and Zip Code)  For further information concerning this matter, please call:  (Name of Person)  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:	Dear Sir or Madam:	
(Name of Person)  AOVANTAGE INOUSTRIES LLC  (Firm/Company)  21997 US 19 NORTH  (Address)  CLEARWATER, FL 33765  (City/State and Zip Code)  For further information concerning this matter, please call:  (Name of Person)  (Name of Person)  At (813) 600 - 5022  (Name of Person)  (Area Code & Daytime Telephone Number Registration Section Division of Corporations Clifton Building P.O. Box 6327 Clifton Building P.O. Box 6327 Clifton Building P.O. Box 6327 Tallahassee, Florida 32301  Enclosed is a check for the following amount:	The enclosed Registered Agent/Registered O	office Change and fee(s) are submitted for filing.
ADVANTAGE INDUSTRIES LLC  (Firm/Company)  21997 US 19 NORTH  (Address)  CLEARWATER, FL 33765  (City/State and Zip Code)  For further information concerning this matter, please call:  (Name of Person)  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:	Please return all correspondence concerning	this matter to the following:
21997 US 19 NORTH  (Address)  CLEAR WATEN, FL 33765  (City/State and Zip Code)  For further information concerning this matter, please call:  (Name of Person)  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:	GLENN NEWMAN (Name of Person)	<u>)                                    </u>
CLEARWATER, FL 33765  (City/State and Zip Code)  For further information concerning this matter, please call:  CLEAR MEWHAN at 813 600 - 5022 (Name of Person)  (Area Code & Daytime Telephone Number Registration Section Division of Corporations Clifton Building	AOVANTAGE INDUST	nies LLC
For further information concerning this matter, please call:    Company   Company	21997 US 19 N	10eth
(Name of Person)  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:	CLEARWATER, FL (City/State and Zip Code)	<u>. 3<i>3</i>76</u> 5
(Name of Person)  (Area Code & Daytime Telephone Number  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, Florida 32301  Enclosed is a check for the following amount:	For further information concerning this matter	er, please call:
Registration Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32301  Enclosed is a check for the following amount:	(Name of Person)	at (813) 600 - 5022  (Area Code & Daytime Telephone Number)
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301  Enclosed is a check for the following amount:	Registration Section	Registration Section
	Clifton Building 2661 Executive Center Circle	P.O. Box 6327
\$25 Filing Fee \$\sum \text{\$55 Filing Fee & Certified Copy}\$	Enclosed is a check for the followin	g amount:
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (8/05)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the State of Florida.	
1. The name of the limited liability company is: ADVANTAGE INDUSTA	ies LLC
2. The mailing address of the limited liability company is: 21997 US 19	1 NORTH
CLEARWATER, FL. 3	3765
11/4/2005 LOSOOO10757  3. Date of filmg/registration in Florida 4. Document number	8
3. Date of filing/registration in Florida 4. Document number	
5. The name of the registered agent and the registered office address as shown on the record Florida Department of State:    Clend Newman   Principal Name	part MAICING
City, State and Zip  6. The name and address of the new registered agent and/or office:    City, State and Zip   Pew   Principal   Principal   Name   Principal   Pew   Principal   Principal   Pew   Pew	& MAILING
CLEALWATER, FL 33765 City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it is confirmed that after the change or changes are made, the Florida street address of the regis and the business office of the registered agent will be identical. Or, in the case of a Florida liability company, it is hereby confirmed that the change(s) was/were authorized by an affi of the members of the limited liability company or as otherwise provided in the articles of or the operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member)	tered office I limited rmative vote
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I fucomply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligations of my position as registered agent as prochapter 608, F.S. Or, if this document is being filed to merely reflect a change in the reginal address. I hereby confirm that the limited liability company has been notified in writing of	rther agree to of my duties, wided for in stered office this change.
(Signature of Registered Agent)	SE DIVIS
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00	GRETA SION OF JUL 21

INHS18 (8/05)