Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL

Account Number : 110432003053

Phone : (561)694-8107

Fax Number

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Enter the email address for this business entity to be used for fug annual report mailings. Enter only one email address please.

Email	Address:	
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LLC REGISTERED AGENT CHANGE AVESTA HOMES PROPERTY MANAGEMENT LLC

Certificate of Status	O SHEET SHEET THE PARTY OF THE
Certified Copy	0
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Corporate Filing Menu

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

1. The name of the limited liability company is:Ave	sta Homes Property Management LLC
2. (a) Principal office address of the limited liability company	:5118 N 56TH ST.
(Note: MUST BE STREET ADDRESS)	
	Tampa FL 33610
(b) Mailing address of limited liability company:	P.O. BOX 311029
(Note: MAY BE POST OFFICE BOX)	
· · · · · · · · · · · · · · · · · · ·	Tampa F1, 33680
2/10/2012	L12000019928
3. Date of filing/registration in Florida	4 Document number
5.(a) Registered Agent and Registered Office shows	on the records of the Florida Dept, of State:
Registered Agent:	CORPORATION SERVICE COMPANY
Registered Office Address:	1201 HAYS STREET
-	
	TALLAHASSEE FL 32301
(b) Enter now of NEWS Desire 1 to 10 years	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	Registered Office address:
NEW Registered Agent:	Corporate Creations Network Inc.
NEW Registered Office Address:	11380 Prosperity Farms Road #221E
(MUST BE FLORIDA STREET ADDRESS)	() () () () () () () () () ()
	Palm Beach Gardens Fl. 33410
identical. Or, in the case of a Florida limited liability compan	s of the State of Florida, it is hereby confirmed that after the change of office and the business office of the registered agent will be y, it is hereby confirmed that the change(s) was/were authorized by apany or as otherwise provided in the articles of organization or
by Kristen Espinales as Attorney-in-Fact (Printed or Typed name of signee)	
of an statutes retained to the proper and complete performance my position as registered agent as provided for in Chapter 60:	to act in this capacity. I further agree to comply with the provisions of S , and S of S of S of S , S . Or, if this document is being filed to merely reflect a change and liability company has been notified in writing of this change.
(Signature of Registered Agent)	
Division of Corporations, P.O.	Box 6327, Tallahassee, FL 32314
NHS18(10799) Corporate Creations International Inc.	
11380 Prosperity Farms Road #221E	
Palm Beach Gardens FL 33410 (561) 694-8107	