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SECRETARY OF STATE TALLAHASSEE, FLORIDA



MAY 03 2016 S. YOUNG

## **COVER LETTER**

TO: Registration Section Division of Corporations				
Ava & Rufus LLC			`	The state of the
· · · · · · · · · · · · · · · · · · ·	me of Limit	ed Liability Company	-	
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Of	fice Change	and fee(s) are submitted for filing.		
Please return all correspondence concerning t	his matter to	the following:		
Diane Lapham				
Name of Person		<del></del>		
Ava & Rufus LLC			16 MAY	SECRI
Firm/Company	*		17-2	HAS
2552 Tomoka Farms Road			PH	- 글루 양수
Address		<del>*************************************</del>	Ė.	STAT STATE
Port Orange, FL 32128			55	를ଳ
City/State and Zip Code				
dlanefl1013@yahoo.com				
E-mail address: (to be used for future an	nual report i	notification)		
For further information concerning this matter	, please call	:		
Diane Lapham	386	274-1744		
Name of Person		Area Code & Daytime Telephone Numbe	ı	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following	g amount:			
<b>2</b> \$25 Filing Fee		\$55 Filing Fee & Certified Copy		

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1. N	ame of the limited liability company: Ava & Rufus	LLC	•	
2. (a)	2552 Tomoka Farms Road	(b) 1890 L	PGA Blvd #210	~
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>	Mailing address of limited liab	the first transfer of the same
	Port Orange, FL 32128	Dayton	a Beach, FL 32117	
	04/25/2016	L120000	034625	
3.	Date of filing/registration in Florida Radcliff Jody CPA	4.	Document number	
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dest of St		ਰ <b>ਨਿੰ</b> ਲ
	870 Dunlawton Ave	the Police Dept. of St	ac.	HA CREI
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	<del></del>	AS AS
	Suite 309	<del></del>		SEELF SEELF
	Port Orange	32127	_	E COL
			<del></del>	<b>55</b>
(b)		1000-241-25	_	
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		
	1890 LPGA Blvd #210			
	NEW Registered Office Address:		-	
	Daytona Beach	20447	_	
	FI	32117	<u>-</u>	
the chargent was/w	limited liability company is not organized under the latange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registered offi ability company, it of the limited liabil	ce and the business office is hereby confirmed that the company or as otherwise mpany.	of the registered he change(s)
Signa	ature of a member or authorized representative of a member		Printed or typed name of sign	nee
noigie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act in this ca performance of m d for in Chapter 61 hereby confirm tha	pacity. I further agree to v duties, and I am familiar 05, F.S. Or, if this docume I the limited liability comp	comply with the with and accep nt is being filed any has been
	are of Registered Agent			