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(Red	questor's Name)	<u></u>
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COVER LETTER

Division of Corporations		
SUBJECT: AVRON INVES	T LIMITED LLC nited Liability Company	
Name of Life	miled Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Edward J Jordan Name of Person		
TAX NERd		
Firm/Company		
815 NE 19th TERRAC	<u>e</u>	
Address		
Ft LAnderdale FL City/State and Zip Code	33304	
E-mail address: (to be used for future annual repo	AIC.COM rt notification)	
For further information concerning this matter, please of	all:	
Edward J Jordan at (954 817-788 8 Area Code & Daytime Telephone Number	
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 amount:		
☎ \$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 10/144	
1. Na	me of the limited liability company: AVRON INVEST LIMITED LLC
2. (a)	AJRON INVEST (IM ITED LLC (b) AJRON INVEST LIMITED LLC Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	_ 470 NE 5th Ave # 3528 470 NE 5th Ave # 3528
	Ft Lauderdale FL 33301 Ft Lauderdale FL 3330)
_	1/24/2017 17000019216
3.	Date of filing/registration in Florida 4. Document number
	BLACKBYRD GROUP LLC
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	3839 NW BOCA RATON BLUD
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	STE 200 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	BOCA RATON FL 33431
(b)	TAX NEDS
	Chicago de la companya de la company
	TAX Ne Rd
	815 NE 19th Terrace NEW Registered Office Address:
	NEW Registered Office Address:
	Ft Lauderdale ,FL 33304
the chan agent wi was/wer	nited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ge or changes are made, the Florida street address of the registered office and the business office of the registered ll be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) e authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in les of organization of the operating agreement of the limited liability company.
¥ 5	
Signatu	re of a member or authorized representative of a member Emmanuel Ulahos Printed or typed name of signce
provisio the oblig to merel	vaccept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ns of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept tations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been withing of this change.
<u> </u>	dwars du du of Registered Agent
Signature	or reduced when