M23000004236

(Re	equestor's Name))
(Ac	idress)	
(Ac	ldress)	
(Cı	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer.	
		4





200437070642



11/21/24 K4

> 2024 NOV -4 AH 11: 29 SECRETARY DE STATI

COVER LETTER

	tegistration (Division of C	Section Corporations						
SUBJEC	CT: ADV	ANTIS MCA LAUD Name of For	ERHIL eign Li	L <u>LLC</u> mited Lial	oility Co	mpany		
Dear Sir	or Madam:							
The enclo	osed applica	tion, certificate and fee	(s) are	submitted	for filing	<u>;</u> .		
Please re	turn all corr	espondence concerning	this ma	atter to the	: followir	ng:		
	Alejac	Name of Person			_			
	J	Name of Person						
ADv	IANTIS MO	A LAUDERHTIL, LLC			_			
		Firm/Company						
175	to Fwz	1eet, Sune 2112						
		Address			_			
Mig	mi, FL 33		<u> </u>		_			
		City/State and Zip C	ode					
Ave E-mail	ICZ @ Mid I address: (to	Hown - Capital. Com be used for future ann) ual rep	ort notific	ation)		SECHL AHASSEE	-
For furth	er informati	on concerning this matt	ter, plea	ise call:			AHAS	100
Ale	ejandro V			305	_) <u>_505</u>	5-4945	···· S ·	E.
	Name	e of Person		Area Cod	e & Dayt	time Telephone Num	ber FATE	
	<u> 1ailing Addre</u> Registration				Street A	ddress: ration Section	•	
	•	Corporations			_	on of Corporations		
	2.O. Box 63					entre of Tallahassee		
Т	fallahassee,	FL 32314				l. Monroe Street, Su issee, FL 32303	ite 810	
E		a check for the followi	ng amo	ount:				
□\$25 Fi	ling Fee	\$30 Filing Fee &		\$55 Filing		□ \$60 Filing Fee.		
		Certificate of Statu	S	Certified (Сору	Certificate of S Certified Co		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	on the records of the Florida Department of
State: ADVANTIS MCA LAUDERH	III, IIC
Enter new principal office address, if applicable:	175 SW 7th STREET, SUITE 2112
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33130
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	175 SW 7 th STREET, SUITE 2112 MIAMI, FL 33130
2. The Florida document number of this limited liab	oility company is: <u>M23 00 000 4236</u>
3. Jurisdiction of its organization: DELAW	ARF
4. Date authorized to do business in Florida: (24)	03 2023
SECTION II (5-9 complete only the applicable c	hanges)
5. New name of the limited liability company:(must	contain "Limited Liability Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C	for the purpose of transacting business in Florida and attach a aging members adopting the alternate name. The alternate name ." or "LLC.")
6. If amending the registered agent and/or registered registered agent and/or the new registered office ad	d officer address on our records, enter the name of Hernew dress here:
Name of New Registered Agent: DADE R	EGISTERED AGENT INC
New Registered Office Address: 175 Sw	7th STREET, SUITE 2112 Enter Florida Street Address
	MIAMI Florida 33130 A Zip Code
the provisions of all statutes relative to the proper c and accept the obligations of my position as registe	t and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with red agent as provided for in Chapter 605, F.S. Or, if this in the registered office uddness, I hereby confirm that the limited

Fitle/ Capacity	<u>Name</u>	Address	Type of Action
MBR	ZAHN, RICHARD G, SR.	1991 INDUSTRIAL DRIVE	🗆 Add
		DELAND, FL 32724	[X]Remove
MGR	PREG-ADVANTIS, LLC	1991 INDUSTRIAL DRIVE	∐Add
		OELAND, FL 32724	Remov
M6R_	MCA MOF LIC	175 SW 7 th Street, Svite	2112 XAdd
		Miami, FL 3.3130	□Remov
			SECULTATION OF STATE
·····	1.242		SEE, FLE
aforementic	a certificate, if required: no more than 90 more amendment(s), duly authenticated by under the law of which this entity is organized.	y the official having custody of records in the	□Remov

Filing Fee: \$25.00