

PO 7000008849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

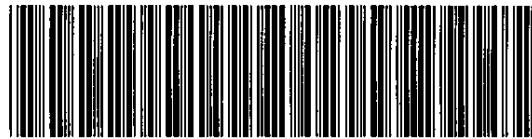
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000106813280

09/04/07--01012--023 \*\*35.00

07 SEP -4 AM 8:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

R.A. Change  
C. Coultette SEP 07 2007

August 23, 2007

To Whom It May Concern:

This letter is to request the following information to be change in my company records. Since I got marry my last name change, so the name on the records has to be change. My company name is ADV Office Solutions, Inc and the document number is P07000008849. The following changes are:

- Change of the name of the Owner / President to: Ann-Michelle Vera (Enclosed you will find a copy of the marriage certificate
- Change of the Principal Address of the Company to: 6631 NW 173 Street  
Miami Lakes, FL 33015
- Change of the Mailing Address of the Company to: P.O. BOX 172435  
Miami Gardens, FL 33017

Enclosed you will find also the form to change the address of the register agent and the \$35.00 check.

Sincerely,



Ann-Michelle Vera  
Owner

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: ADV OFFICE SOLUTIONS, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P07000008849

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANN-MICHELLE VERA  
(Name of Contact Person)

ADV OFFICE SOLUTIONS, INC.  
(Firm/Company)

P.O. BOX 172435  
(Address)

MIAMI GARDENS, FL 33017  
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID VERA at ( 305 ) 984-6545  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ADV OFFICE SOLUTIONS, INC.
2. The principal office address: 6361 NW 173 STREET  
MIAMI LAKES, FL 33015
3. The mailing address (if different): P.O. BOX 172435  
MIAMI GARDENS, FL 33017
4. Date of incorporation/qualification: 01/19/2007 Document number: P07000008849
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ANN DE LA FE

2411 NW 10 AVENUE, APT. 305

MIAMI, FL 33127

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ANN-MICHELLE VERA

6361 NW 173 STREET

(P.O. Box NOT acceptable)

MIAMI LAKES, FL 33015

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



(Signature of an officer or director)

ANN-MICHELLE VERA

(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

08/23/2007

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

**\* \* \* FILING FEE: \$35.00 \* \* \***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

07 SEP -4 AM 8:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED