

P090000083108

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

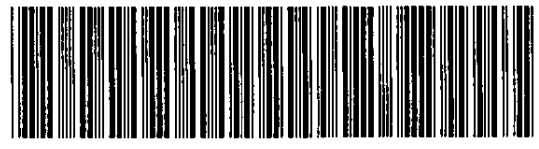
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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11/23  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUL -2 AM 11:44

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10 7/3/12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ADV Corp  
Name of Corporation

**DOCUMENT NUMBER:** P09000083108

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:

Sharon del Valle  
Name of Contact Person

\_\_\_\_\_  
Firm/Company

8140 NW 155 Street, Ste 201  
Address

Miami, FL 33016  
City/State and Zip Code

sharon@adelvalle.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon del Valle at ( 305 ) 822-1266  
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 Corp
2. The principal office address: 8140 NW 155 Street, Ste 201  
Miami, FL 33016
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: P09000083108
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Sharon del Valle  
7950 NW 155 Street, Ste 205  
Miami Lakes, FL 33016

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

Sharon del Valle  
8140 NW 155 Street, Ste 201  
Miami, FL 33016

P.O. Box NOT acceptable

12 JUL - 2 AM 11:44  
STATE DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS

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.

Sharon del Valle  
Signature of an officer or director

Sharon del Valle, President  
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.*

Sharon del Valle  
Signature of Registered Agent

6/22/2012  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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