Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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NOV 07 2018

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 Phone : (702)866-2500

Fax Number : (702)866-2689

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

EMBIL Addreso: documents @ incexp. Com

REGISTERED AGENT CHANGE ALAVA CORPORATION

Certificate of Status	0
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COVER LETTER

TO: Amendment Division of	Section Corporations			
SUBJECT:	Alava Corpoi			
	Name of Co	proration		
DOCUMENT NUM	IBER: P10	000079706		
The enclosed Statem	ent of Change of Registered Office	Agent and fee are submitted for filing.		
Please return all corr	espondence concerning this matter	to the following:		
	Jennifer S	Sharp		
Jennifer Sharp Name of Contact Person				
InCorp Services, Inc.				
_	Firm/Co	mpany		
	3773 Howard Hughes Pkwy. · Suite 500S			
_	Addr			
	Las Vegas, NV	89169-6014		
-	City/State and Zip Code			
	documents@i	Booth com		
Ē	documents@i -mail address: (to be used for fu	ture annual report notification)		
For further informati	on concerning this matter, please c	all:		
	-			
<u>Jennifer Sharp on</u> Name	behalf of InCorp Services, Inc of Contact Person	. at (<u>800</u>) <u>246 - 2677</u> Area Code & Daytime Telephone Number		
		,		
Enclosed is a \$35.00	check made payable to the Departi	ment of State.		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		
		Tallahassee, FL 32301		

CR2E045 (03/12)

418000 3001033

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

1. The name of	he corporation: Alava Corporation		
2. The principal	office address: 495 Brickell Ave Ur	nlt 3610	
2. The principal	Miami, FL 33131		
3. The mailing a	ddress (if different):		·
4. Date of incorp	poration/qualification: 09/30/20	Document number:	P10000079706
	street address of the current registere tment of State: (If resigned, enter resi	ed agont and registered office on f	
	CORPORATE MAINTEN	NANCE SERVICES, LLC.	
	1000 Brickel	Avenue, 400	
	Mlami, F	FL 33131	2018 FAI
6. The name and (if changed):	street address of the new registered a	igent (if changed) and /or registers	2018 NOV -6 SECRE VALVASION -6 ed office
	InCorp Se	rvices, inc.	一节量「
		Court North	
		voraceptable e, FL 33470	
	ss of its registered office and the street identical. s authorized by resolution duly adopt the corporation has been		
Nomaliu -	t of an ellicor or director	Eduardo Hughes, Directo	
•	the appointment as registered agent to comply with the provisions of all single duties, and I am familiar with one a document is being filed merely to real the corporation has been notified.		
		October 26,	2018
lf signing on beh	attent of Registered Agent	Data	
	-		
	n behalf of InCorp Services, Inc.		
		FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)