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## **COVER LETTER**

SUBJECT:	Avanti-Salem C	ornoration	
SUBJECT:	Name of C		
DOCUMENT NUMBE	R:P16	000006814	
The enclosed Statement	of Change of Registered Offic	e/Agent and fee are submitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	Jennifer A Name of Co	nderson ntact Person	
MyLLC.com, Inc. Firm/Company			
	1910 Tho Add		
	Add	1000	
	Cheyenne, City/State ar	WY 82001 nd Zip Code	
	service@n	nyllc.com /	
ts-m	all address: (to be used for i	uture annual report notification)	
For further information	concerning this matter, please	call:	
Jennifer Anderson on I	pehalf of MyLLC.com, Inc. Contact Person	at ( <u>888</u> ) <u>886-9552</u> Area Code & Daytime Telephone Number	
Name of	Contact 1 Cison	Area Code & Daytine Telephone Number	
Enclosed is a \$35.00 che	eck made payable to the Depar	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

TO:

Amendment Section Division of Corporations

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

statement of chai	nge is submitte	d for a corp	ooration organi	2, 607.1508, or 617.1508, Flo ized under the laws of the Stat red agent, or both, in the Stat	re of Florida	_		
1. The name of the	he composition	Avanti-Sa	llem Corporat	tion	v			
2. The principal of	office address:	Avanti-Salem Corporation 13801 Walsingham Rd #A-421						
2. The principal	orrice address.	Largo, FL 33774						
3. The mailing ac	ddress (if diffe	rent):						
4. Date of incorp	oration/qualifi	cation:	01/20/2016	Document number:	P160000068	314		
			nt registered ag I, enter resigned	gent and registered office on t	ile with the			
	UNIT	ED STATI	ES CORPOR	ATION AGENTS, INC.				
		1330	)2 Winding O	ak Court · A				
			Tampa, FL	33612	200	18		
6. The name and street addres (if changed):		of the new	registered agen	t (if changed) and /or register	ed office	JAN 17		
			InCorp Servic	es, Inc.	<u> </u>	至門		
		17888 67th Court North			AH :: 45			
	·		P.O. Box NOT acceptable			ັນ		
			oxahatchee, F	-L 33470	<del></del>			
The street address as changed will	ss of its registe be identical.	ered office	and the street a	ddress of the business office	of its registered a	agent,		
Such change was authorized by the	s authorized b e board, or the	y resolution corporatio	duly adopted n has been not	by its board of directors or bified in writing of the change	y an officer so			
V Jose Co	Chale K	- auto	7	Jose Alfredo Cardoza, Pr	resident			
Signatur	of an officer or di	rector		Printed or typed name	and title			
I fürther agree to performance of r agent. Or, if this	o comply with my duties, and s document is	the provisi 'I am famil being filed	ons of all statu iar with and ac merely to refle	l agree to act in this capacity tes relative to the proper and cept the obligation of my po- ct a change in the registered writing of this change.	l complete sition as revistere	ed .		
N		lino	W 20th	January 8,	2018			
Sign	ature of Registered	Agent	-00./	Date				
If signing on beh	nalf of an entit	y:						
Jennifer And	derson on beh	alf of MyL	LC.com, Inc.					
Ту	ped or Printed Nam	<u> </u>						

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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