## P16000040782

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT N	1AIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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SECRETARY OF STATE TALLAHASSEE, FLORID!

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## **COVER LETTER**

TO: Amendme Division o	nt Section f Corporations	
SUBJECT:	Tyavly (o	oration 782 gent and fee are submitted for filing.
DOCUMENT NU	MBER: <u>P16000040</u>	782
The enclosed State	ement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all co	orrespondence concerning this matter to	
	Briana Ba	(dwin
	Name of Contac	t Person
	Travir	Co.
	Firm/Comp	<u>Co</u> .
	2551 River	Ridge Dr.
-		
	Orlando, Fi	_ 32825
	City/State and Z	ap Code
	Lovern HT	zle me.com
-	E-mail address: (to be used for future	
For further inform	ation concerning this matter, please call	:
2:	Z (1-1)i.	777 /22 . /020
Na Na	me of Contact Person	at ( 727 ) 633 - 1038  Area Code & Daytime Telephone Number
	00 check made payable to the Departme	
Enclosed is a 500%	to theek made payable to the Departite	in or state.
	Mailing Address:	Street Address:
	Amendment Section Division of Corporations	Amendment Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	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: TVAV (V Co.
2. The principal office address: 255   River Ridge Dr  Orlando FL 32825
orlando FL 32825
3. The mailing address (if different):
4. Date of incorporation/qualification: 5/5/2016 Document number: P16 0000 40 7
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)
Briana Baldwin
2551 River Ridge Dr
Briana Baldwin  2551 River Ridge Dr  ovlando, FL 32825
6. The name and street address of the new registered agent (if changed) and /or registered of the changed):  Eliecer Vera  3806 SU 171 ter
Miramar FL , 33027
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.
Briana Baldwin  Signature of an officer or director  Briana Baldwin
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.
Signature of Registered Agent Date
If signing on behalf of an entity:
Clie cer Jeson Typed or Printed Name

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