P1900078946			
(Requestor's Name) (Address) (Address)	800384929818		
(City/State/Zip/Phone #)	2012 App - 1 An Ang 5		
Certified Copies Certificates of Status	2022 API1, PM 3: 26		
Office Use Only			

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I200	00000195
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2

REFERENCE : 588480

AUTHORIZATION

COST LIMIT \$135.-00 :

1 1 1

8336674

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- ORDER DATE : April 4, 2022
- ORDER TIME : 2:17 PM
- ORDER NO. : 588480-015
- CUSTOMER NO: 8336674

\_\_\_\_\_ 

## CHANGE OF AGENT

NAME: AVANTSTAY INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX \_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

## DocuSign Envelope ID: D113C3E6-21D3-4DA4-A119-49009D3B53D1

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## 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 <u>FL</u>\_\_\_\_\_\_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of th	e corporation: AVANTSTAY INC.	
	Mice address: os Angeles, CA 90035	
3. The mailing ad	dress (if different):	
4. Date of incorporation/qualification: _10/08/2019 Document number: _P19000078946		
5. The name and s Florida Departi	atreet address of the current registered agent and registered office on file wit nent of State: (If resigned, enter resigned) WHITSON, NICOLE 3743 THOMAS DRIVE #919 PANAMA CITY BEACH, FL 32408	h the
6. The name and s (if changed):	street address of the new registered agent (if changed) and /or registered off	ice من
-	Corporation Service Company	
_	1201 Hays Street	
P.O. Box_NOT acceptable		
	Tallahassee FL 32301	

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.

	Jesse Suarez - Vice President
Signature of an officer or director	Printed or typed name and title
I hereby accept the appointment as registered a I further agree to comply with the provisions of of my duties, and I am familiar with and accept document is being filed merely to reflect a char corporation has been notified in writing of this <b>Corporation Service Company</b> By: Signature of Registered Agent If signing on behalf of an entity:	gent and agree to act in this capacity. all statutes relative to the proper and complete performance the obligation of my position as registered agent. Or, if this ge in the registered office address. Thereby confirm that the change. $\frac{3/31/2022}{Date}$
Grace E. Kirby, Asst. Vice President	
Typed or Printed Name	_
* * * FIL	ING FEE: \$35.00 * * *
	TO FLORIDA DEPARTMENT OF STATE IONS, P.O. BOX 6327, TALLAHASSEE, FL 32314