

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000065083

**Entity Name:** ADVENT ARTIFACTS, LLC

**Current Principal Place of Business:**

4173 MARSEILLES AVE  
SARASOTA, FL 34233

**Current Mailing Address:**

4173 MARSEILLES AVE  
SARASOTA, FL 34233 US

**FEI Number:** 26-3003840

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MARTINEZ, CAMILLE  
4173 MARSEILLES AVENUE  
SARASOTA, FL 34233 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name MARTINEZ, CAMILLE  
Address 4174 MARSEILLES AVENUE  
City-State-Zip: SARASOTA FL 34233

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CAMILLE MARTINEZ

**OWNER/MANAGER**

**04/14/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date