L14000042002

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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	ARDE ĻLC	2.111199 2		
	Name of Litt	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Steven R Gaskill			
		Name of Person		
	AVANT-GARDE LLC			
	•	Firm/Company		
	427 Papaya St #777			
		Address		
	Goodland, FL 34140			
		City/State and Zip Code		
	srgaskill@gmail.com			
	E-mail address: (to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
Steven R. Gaskill		239 682-3471 at ()		
Name of Person			ne Telephone Number	
inclosed is a check for the	ne following amount:			
■ \$25.00 Fiting Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ction	
Division of C			Registration Section Division of Corporations	
P.O. Box 632	7	The Centre of T	Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 OCT -1 AM 5:49

AVANT-GARDE LLC

(Name of the Limited Liability Company as it now appears on our records.) A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability C	ompany were filed on 09/29/2021	and assigned
Florida document number L14000042002	 '	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Manager	GASKILL, Kenneth L	427 Papaya St	
		777	■Remove
		Goodland, FL 34140	
Manager Gaskill, Alicia K	Gaskill, Alicia K	427 Papaya St	
		777	□Remove
		Goodland, FL 34140	☐ Change
		 	□Add
			□Remove
			
			□Λdd
			□Remove
			□Change
	 		□Add
			□Change
			□Add
			□Remove
			☐ Change

	
	
	
Effective date, if other than t	the date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
Note: If the date inserted in this	s block does not meet the applicable statutory filing requirements, this date will not be listed as
document's effective date on the	e Department of State's records.
e record specifies a delayed effec	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed.	
Comtombou 20th	2021
September 29th Dated	2021
	at in an
	Steven M. Jaskell
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member Steven R. Gaskill

CHI. D COLOR