L19000146976

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Registration Section

TO:

Division of Con	porations				
AVANTLC SUBJECT:	GS LLC				
3000ECT	Name of Limi	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Pedro Tinoco				
	Eagle Corporate Services	Name of Person			
		Firm/Company			
	444 Brickell Avenue Suite F	• •			
	Miami, FL 33131	Address	·		
	corporate@eagleincorp.com	City/State and Zip Code			
	E-mail address: (to be used for future annual report no	tification)		_
For further information of	concerning this matter, please ca	all:		1112	 <u></u>
Pedro Tinoco		305 423-0960		- -	
Name o	of Person		ne Telephone Number	<u>124</u>	
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Stat Certified Copy (additional copy is end		ATIONS
Regist Division P.O. B	JING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Section Division of Corporal Clifton Building 2661 Executive Country Tallahassee, FL 3	orations Center Circle		



November 4, 2019

PEDRO TINOCO EAGLE CORPORATE SERVICES 444 BRICKELL AVENUE, SUITE P-41 MIAMI, FL 33131

SUBJECT: AVANTLOGS LLC Ref. Number: L19000146870

We have received your document for AVANTLOGS LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 819A00022747

Diane Cushing Senior Section Administrator

2019 NOV 15 PH 12: 51

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AVANTLOGS LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L19000146870	were filed on 06/03/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1901 Brickell Ave Suite 409	=======================================
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33129	3
		S V
		<u> </u>
Enter new mailing address, if applicable:	1901 Brickell Ave Suite 409	E (2)
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33129	= 85 15 15
	,	15
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		r the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida _	Zin Code
New Registered Agent's Signature, if changing Registered Agent:	City	Lip Code

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 Changing Registered Agent, Signature of New Registered Agent

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
1400	Eneida Fernandez	4455 E 10TH AVE	
MGR			
		HIALEAH, FL 33013	
			Remove
			Change
	Ana I. Lopez	1901 Brickell Ave Suite 409	D Change
MGR	, was it copes	ios i Bristian i ios outre 100	 Add
		Miami, FL 33129	Add
		Wildrin, 1 E 30123	
			Remove
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	t be specific and cannot be prior to date of file ock does not meet the applicable statute	(optional) ling or more than 90 days after filing.) Pursuant to 605.0207 (ory filing requirements, this date will not be listed as t
e record specifies a delayed The 90th day after the rec		ctive time, at 12:01 a.m. on the earlier of:
October 9th	2019	
	771	
	Signature of a member or authorized repres	·

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00