

L19000210318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

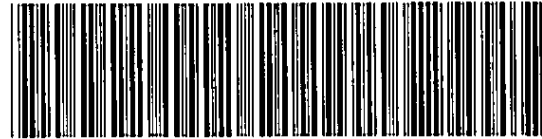
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Rec'd
5/3
OK Attached

Office Use Only



500365302985

06/16/21--01005--001 **25.00

2021 JUN 29 PM 5:51
JALIN ARSALAN

2021 JUN 29 PM 5:51

6:11 PM

D BRUCE
JUL 22 2021



REC 111

2021 JUN 19 11:04

FLORIDA DEPARTMENT OF STATE

Division of Corporations

STATE
RE, FL

June 15, 2021

DEMARIUS TERRANCE SNYDER
3400 W BOBE ST
PENSACOLA, FL 32505

SUBJECT: ADVANCELIFEVENTURE, LLC
Ref. Number: L19000210318

We have received your document for ADVANCELIFEVENTURE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

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) 245-6842.

Deborah Bruce
Corporate Records Supervisor II

Letter Number: 021A00013390

2021 JUN 29 PM 5:54
TALLAHASSEE, FL
FBI

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ADVANCELIFEVENTURE, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Demarius T Snyder

Name of Person

ADVANCELIFEVENTURE, LLC

Firm/Company

3400 W Bobe St

Address

Pensacola, Florida 32505

City/State and Zip Code

dt.snyder81@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Demarius T Snyder

850

4909174

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2021 JUN 29 PM 5:54
TALLAHASSEE, FL

2021 JUN 29 PM 5:54

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ADVANCELIFEVENTURE, 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 Company were filed on 08/19/2019 and assigned
Florida document number L19000210318.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3400 W Bobe St

Pensacola, FL 32505

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3400 W Bobe St

Pensacola, FL 32505

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, Florida

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 Changing Registered Agent, Signature of New Registered Agent

If appending 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>	<u>Type of Action</u>
MGR	Demarius T Snyder	3400 W Bobe St	<input type="checkbox"/> Add
		Pensacola, FL 32505	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2021 JUN 29 PM 5:56
TALLAHASSEE, FL
FD

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

2021 JUL 29 PM 5:54
TALLAHASSEE FL 32301

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 13, 2021

Demarius Snyder

Signature of a member or authorized representative of a member

Demarius T Snyder

Typed or printed name of signer