

L20 000 213 204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

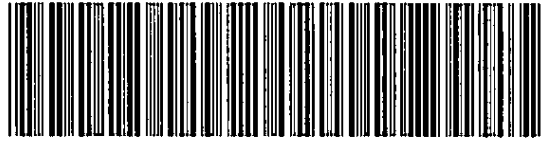
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FILED
2020 OCT 22 PM 4:15
STATE OF CONNECTICUT
SECRETARY OF STATE

OCT 22 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 25, 2020

ANDREW SPENCER
AVC CAPITAL MANAGEMENT L.L.C
123 BLOOMINGDALE AVENUE
BRANDON, FL 33511

SUBJECT: AVC CAPITAL MANAGEMENT L.L.C
Ref. Number: L20000213204

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

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Shelia S Young
Regulatory Specialist II

Letter Number: 720A00018457

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AVC CAPITAL MANAGEMENT L.L.C
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:

ANDREW SPENCER
Name of Person
AVC CAPITAL MANAGEMENT L.L.C
Firm/Company
123 BLOOMINGDALE AVE
Address
BRANDON FLORIDA 33511
City/State and Zip Code
avccapitalmanagementllc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew Spencer at 813 580-4022
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

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

AVC CAPITAL MANAGEMENT L.L.C

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

FILED
2020 OCT 22 PM 4:15
and assigned
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
DADE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 7/17/20

Florida document number L2000213204

This amendment is submitted to amend the following:

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

AVC CAPITAL MANAGEMENT L.L.C

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

_____, Florida _____
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 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>	<u>Type of Action</u>
DIR	ANDREW SPENCER	123 BLOOMINGDALE AVE	<input type="checkbox"/> Add
		BRANDON FL 33511	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ANDREW SPENCER	123 BLOOMINGDALE AVE	<input checked="" type="checkbox"/> Add
		BRANDON FL 33511	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<i>MGR</i>	<i>Alecia Spencer</i>		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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