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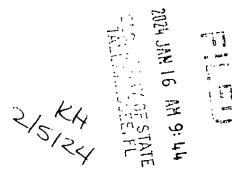
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COVER LETTER

TO:		istration Sec ision of Corp			
cunic	·an	BERNADE			
SUBJE	CI:		Name of Lim	ited Liability Company	·
			Amendment and fee(s) are sub		
			Philip W. Grosdidier		
				Name of Person	
					
			bemadettebunch@gmail.co	City/State and Zip Code m	
			E-mail address: (to be used for future annual report notificati	
For furt	ther in	formation co	oncerning this matter, please c	all:	
Philip '	W. Gr	osdidier		772 287-444 at ()	7.77
		Name of	f Person		ephone Number
Enclose	ed is a	check for th	e following amount:		in 0 6
□ \$ 25	5. 00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	E \$60.00 Filing Fee. 177 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

BERNADETTE BUNCH, 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 $\frac{05/30/2023}{1}$ and assigned Florida document number _____L23000262244 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: **AVANT GARDE 88, LLC** 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 reg agent and/or the new registered office address here: Name of New Registered Agent: 2300 SE Monterey Road, Suite 201 New Registered Office Address: Enter Florida street address

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.

City

Stuart

, Florida <u>349</u>96

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>	Address	Type of Action
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ective date, if other than the effective date is listed, the date in tee. If the date inserted in this	ust be specific an block does not	d cannot be prior meet the applic	to date of filing or	more than 90 days	after filing.) . this date v	Pursuant to will not be	o 605.02 listed
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Filing Fee: \$25.00