

N23000013110

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

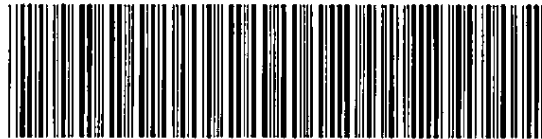
Special Instructions to Filing Officer:

Sign form
Swap checks

4085, 1676

Wrong form money due

Office Use Only



100429066431

08/19/24--01021--011 **35.00

05/02/24--01047--003 **75.00

FILED
2024 AUG 12 AM 9:50
CLERK OF STATE

Ra Change

AUG 14 2024

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ADVANTGARDE: IMPACTING LIVES INC
Name of Corporation

DOCUMENT NUMBER: N23000013110

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RUTH E MARTE

Name of Contact Person

CAPITAL TAX & FILING SOLUTIONS LLC

Firm/Company

375 N STATE RD 434 STE 2208

Address

ALTAMONTE SPRINGS, FL 32714

City/State and Zip Code

felixlopez3370@gmail.com

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

For further information concerning this matter, please call:

RUTH E MARTE

Name of Contact Person

at (863) 599-9894

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

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

FILED
2024 AUG 12 AM 9:50
STATE CLERK OF
FLORIDA
TALLAHASSEE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2024

RUTH E MARTE
CAPITAL TAX & FILING SOLUTIONS LLC
375 N STATE RD 434 STE 2208
ALTAMONTE SPRINGS, FL 32714

SUBJECT: ADVANTGARDE: IMPACTING LIVES INC
Ref. Number: N23000013110

We have received your document for ADVANTGARDE: IMPACTING LIVES INC 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 form you submitted is for a Limited Liability Company, but your entity is a Corporation. Please complete and return the enclosed blank form(s).

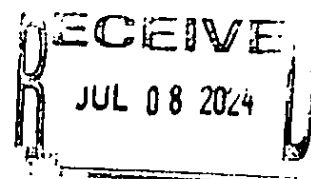
The New Registered Agent must sign the acceptance statement. We will need an additional \$10.00 for this corporate registered agent change.

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.

Diane Cushing
Operations Manager A

Letter Number: 324A00012359





FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 19, 2024

RUTH E MARTE
CAPITAL TAX & FILING SOLUTIONS LLC
375 N STATE RD 434 STE 2208
ALTAMONTE SPRINGS, FL 32714

AUG 14 2024

SUBJECT: ADVANTGARDE: IMPACTING LIVES INC
Ref. Number: N23000013110

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

We only needed an additional \$10.00. Please swop out this \$35.00 check for one in the amount of \$10.00.

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

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.

Diane Cushing
Operations Manager A

Letter Number: 024A00015907

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ADVANTGARDE: IMPACTING LIVES INC
2. The principal office address: 1621 KERSLEY CIR
LAKE MARY, FL 32746
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/30/2023 Document number: N23000013110
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RUTH E MARTE

375 N STATE RD 434 STE 2208

ALTAMONTE SPRINGS, FL 32714

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

FELIX I LOPEZ BERMUDEZ

1621 KERSLEY CIR

P.O. Box NOT acceptable

LAKE MARY, FL 32746

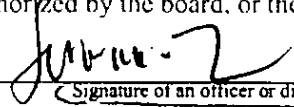
SECRETARY OF STATE
TALLAHASSEE, FL

2024 AUG 12 AM 9:50

FILED

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

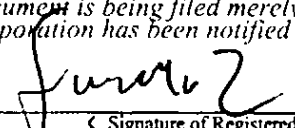
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

FELIX I LOPEZ BERMUDEZ PRESIDENT

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

06/14/2024

Date

If signing on behalf of an entity:

FELIX I LOPEZ BERMUDEZ

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)