## P19000089325

| (Re                     | equestor's Name)                      | · <del></del> |
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| (Ac                     | ddress)                               | -             |
| (Ac                     | ddress)                               |               |
| (Ci                     | ty/State/Zip/Phone #)                 | <u></u>       |
| PICK-UP                 | ☐ WAIT                                | MAIL          |
| (Bd                     | usiness Entity Name)                  |               |
| (Do                     | ocument Number)                       |               |
| Certified Copies        | Certificates of S                     | Status        |
| Special Instructions to | Filing Officer:                       |               |
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Office Use Only

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| CORPORATION:Av  | ANT GARDE CUSTOMZ & RESTORATION, I'M  |
|---|---|
|   | 1000089325  |
| d <i>Articles of Amendment</i> and fee a  | re submitted for filing.  |
| n all correspondence concerning thi   | s matter to the following:  |
| Franc   | isco Hernandez  |
| -   | Name of Contact Person  |
| Av  | int Grande Customz & Restoration  |
| 20  |   |
|   | Address   |
| Mia   | mi Fl. 35141  |
| _   | City/ State and Zip Code  |
| E-mail address: (to   | e used for future annual report notification)   |
| nformation concerning this matter,  |   |
| ancisco Hernande  | at (*786), 301-2000   |
| Name of Contact Person  | Area Code & Daytime Telephone Number  |
| a check for the following amount m  | ade payable to the Florida Department of State:   |
| ing Fee □\$43.75 Filing Fee<br>Certificate of Stat  |   |
| Mailing Address  Amendment Section Division of Corporations   | Street Address Amendment Section Division of Cornorations   |
| E-mail address: (to  E-mail address: (to  The property of the following amount many free Section of State State State State State State State Section of State State State Section of State Section of State State Section of | Firm/ Company  21 NW 7 Ave  Address  Mi F1. 33127  City/ State and Zip Code  Cank D aac ustone. Com  be used for future admual report notification)  please call:  at ( *786 ) 301-2000  Area Code & Daytime Telephone Number  ade payable to the Florida Department of State:  & \$43.75 Filing Fee & \$52.50 Filing Fee  as Certified Copy Certificate of Status (Additional copy is certified Copy (Additional Copy is enclosed)  Street Address |

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



June 9, 2020

FRANCISCO HERNANDEZ 2921 NW 7TH AVENUE MIAMI, FL 33127

SUBJECT: AVANT GARDE CUSTOMZ & RESTORATION, INC.

Ref. Number: P19000089325

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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: 220A00011308

Claretha Golden Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation of

AVANT GARDE CUSTOMZ & RESTORATION, INC.

| 2923 | Ĺ!: | -R | R:3 | g. | n ' |
|------|-----|----|-----|----|-----|

| (Name of Corporation as currently  | filed with the Florida Dept. of State)                                      |
|--|---|
| P190000  | 89325   |
| (Document Number of  | Corporation (if known)  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:  | <i>llorida Profit Corporation</i> adopts the fellowing amendment(s) to      |
| A. If amending name, enter the new name of the corporation:  Avant Garde Design  name must be distinguishable and contain the word "corporation," co "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A | ompany, "or "incorporated" or the abbreviation "Corp.,"                     |
| "chartered," "professional association," or the abbreviation "P.A."  |   |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  | <u> </u>  |
|  |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | <u>Same</u>   |
| D. If amending the registered agent and/or registered office addr-<br>new registered agent and/or the new registered office address:   | <del></del>   |
| Name of New Registered Agent   | <u>ne</u>   |
| (Florida stre  | et address)   |
| New Registered Office Address;   | Chy) (Zip Code)   |
| New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w  Signature of New Re   | ith and accept the obligations of the position.  gistered Agent of changing |
| Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (  | e), F.S.  |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change          | <u>PT</u>    | John Doc    |                 |
|----------------------------|--------------|-------------|-----------------|
| X Remove                   | <u>V</u>     | Mike Jones  |                 |
| _X Add                     | <u>sv</u>    | Sally Smith |                 |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change                  |              |             |                 |
| Add                        |              |             |                 |
| Remove                     |              |             | <u></u>         |
| 2) Change                  |              |             | <u> </u>        |
| Add                        |              |             |                 |
| Remove 3 ) Change          |              |             |                 |
| Add                        |              |             |                 |
| Remove                     |              |             |                 |
| 4) Change                  |              |             | <u></u>         |
| Add                        |              |             |                 |
| Remove                     |              |             |                 |
| 5) Change                  |              | ·           |                 |
| Add                        |              |             |                 |
| Remove                     |              |             |                 |
| 6) Change                  |              |             |                 |
| Add                        |              |             |                 |
| Remove                     |              |             |                 |

| f amending or adding additional Arti<br>Attach additional sheets, if necessary). | (Be specific)  |
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| f an amendment provides for an excl  | hange, reclassification, or cancellation of issued shares, |
| (if not applicable, indicate N/A)  | endment if not contained in the amendment itself:          |
| (i) not applicant, materix (1.1)   |  |
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| s. S.   | J   | 05/11/-                                     | 2_0                         | , if other than the            |
|---|---|---|-----------------------------|--------------------------------|
| The date of each amen<br>date this document was | dment(s) adoption:signed.   |   |                             | , if other than the            |
| Effective date <u>if applic</u>                 | able:   | 05/11/20                                    |                             |                                |
|   | (no 1.  | nore than 90 days after an                  | vendment file date)         |                                |
|   | ted in this block does not medite on the Department of State      |   | filing requirements, this   | date will not be listed as the |
| Adoption of Amendme                             | ent(s) ( <u>CHECK</u>   | ONE)  |                             |                                |
| The amendment(s) was not require                | ras/were adopted by the incorpred.                                | oorators, or board of directo               | ors without shareholder ac  | ction and shareholder          |
|   | vas/were adopted by the sharely<br>was/were sufficient for approx |   | tes cast for the amendmen   | nt(s)                          |
|   | vas/were approved by the share<br>provided for each voting group  |   |                             | met.                           |
| "The number o                                   | of votes cast for the amendmen                                    | ni(s) was/were sufficient fo                | r approval                  |                                |
| by  | 100 % (voting gr  |   |                             |                                |
|   | (voting gre   | oup)  |                             |                                |
| Dated   |   | 20  |                             |                                |
| Signa   | ture  | or other officer - if director              | rs or officers have not bee | <u></u>                        |
|   |   | tor – if in the hands of a re-              |                             |                                |
|   |   | •   |                             |                                |
|   | (Frenk) Fra   | enciseo Herna.  I or printed name of person | verios                      |                                |
|   | (Typec  |   | i signing)                  |                                |
|   |   | President                                   |                             |                                |
|   | (Title o  | of person signing)                          |                             | <del></del>                    |