

L15000037448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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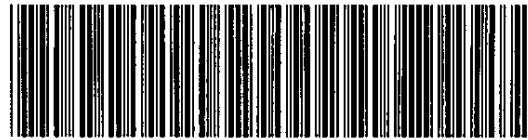
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

D. SCOTT

FEB 22 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Andrea B Chirls, PLLC
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:

Andrea B Chirls
Name of Person
Andrea B. Chirls, PLLC
Firm/Company
9846 SW 118 Ave
Address
Miami, FL 33186
City/State and Zip Code
ACHIRLS@COMCAST.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrea B Chirls at (305) 804-6555
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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

Andrea B. Chirls, 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 2/25/15 and assigned Florida document number L15000037448

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9846 SW 118 Ave

Miami, FL 33186

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9846 SW 118 Ave

Miami, FL 33186

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:

Andrea B. Chirls

New Registered Office Address:

9846 SW 118 Ave, E

Enter Florida street address

Miami

City

Florida

33186

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.

[Signature]

If Changing Registered Agent, Signature of New Registered Agent

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MIAMI, FLORIDA

MGR = Manager
AMBR = Authorized Member

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77
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Remove
Add
Remove
TALLAHASSEE FLORIDA
SECRETARY OF STATE

[illegible]

(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)

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Anaëra B. Chirib
Typed or printed name of signee

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TALLAHASSEE, FLORIDA