

L12000124331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

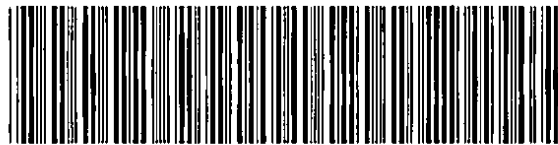
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



000377496450

RECEIVED
FEB 1 2022
FALLS CHURCH, VA

2021 DEC 21 AM 9:30

RECEIVED
FEB 1 2022
FALLS CHURCH, VA

2021 DEC 21 PM 4:17

RECEIVED



COGENCYGLOBAL

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Account#: I200000000088

Date: **December 21, 2021**

Name: **David Shulman**

Reference #: **1554425**

Entity Name: **CHS WEALTH MANAGEMENT & CPAS, PLLC**

☐ Articles of Incorporation/Authorization to Transact Business

☒ **Amendment**

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ **Other** **Please provide a certified copy of the filing evidence. Thank you!**

**ISSUES? CALL
David:
850-270-0082**

Authorized Amount: **\$55.00**

Signature: *David Shulman*



COGENCYGLOBAL

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: **December 21, 2021**

Account#: 120000000088

Name: **David Shulman**

Reference #: **1554425**

Entity Name: **CHS WEALTH MANAGEMENT & CPAS, PLLC**

☐ Articles of Incorporation/Authorization to Transact Business

☒ **Amendment**

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ **Other**

Please provide a certified copy of the filing evidence. Thank you!

**ISSUES? CALL
David:
850-270-0082**

Authorized Amount: **\$55.00**

Signature: *David Shulman*

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

CHS Wealth Management & CPAs, 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 September 28, 2012 and assigned
Florida document number L12000124331

This amendment is submitted to amend the following:

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

CHS Wealth Management & CPAs, PLLC

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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The purposes for which the Professional Limited Liability Company is organized are: (i) tax-related services including, but not limited to, attest and assurance work, tax planning, tax preparation, and advisory services; (ii) financial planning services, including, but not limited to, wealth management services, retirement planning and retirement plan administration; and (iii) business services, including, but not limited to general business consulting, accounting, bookkeeping and payroll services, contract chief financial officer services, business start-up and succession planning, and business valuation, merger and acquisition advisory services.

2021 DEC 21 AM 9:30
RECEIVED
FEB 1 2022


E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 12/21, 2021



Signature of a member or authorized representative of a member

Catherine Harris

Typed or printed name of signee

Filing Fee: \$25.00