

L17000169233

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R. WHITE

MAR 12 2019

FILED
2019 MAR -4 PM 2:30
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHIA PROJECTS LLC

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:

NOREXA HENRIQUEZ

Name of Person

CHIA PROJECTS LLC

Firm/Company

2095 W 76TH St, Suite 101

Address

Hialeah, FL 33016

City/State and Zip Code

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

For further information concerning this matter, please call:

NOREXA HENRIQUEZ

Name of Person

at (_____) _____

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, FL

Page 1 of 3

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Gil De Freitas	2095 W 76TH St, Suite 101	<input checked="" type="checkbox"/> Add
		Hialeah, FL 33016	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Norexa Henriquez	2095 W 76TH St, Suite 101	<input checked="" type="checkbox"/> Add
		Hialeah, FL 33016	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

The Company shall be manager-managed.

The members of the Company are Norexa Henriquez (99%) and Gil De Freitas (1%).

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)

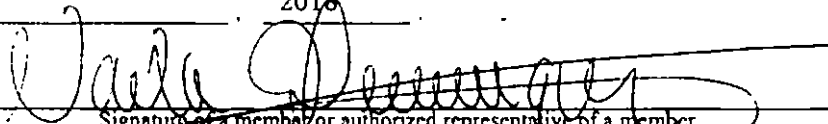
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 December 19

2018



Signature of a member or authorized representative of a member

NOREXA HENRIQUEZ, MEMBER

Typed or printed name of signee