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COVER LETTER

TO:	Registration Sec Division of Corp			
CHD IE/		e Empire, PLLC		
SUBJEC	U1:	Name of Lim	ited Liability Company	
The encl	losed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspoi	ndence concerning this matter	to the following:	
		Joey M. McCall, Esq		
			Name of Person	
		McCall Atten, Internation	onal	
			Firm/Company	
		P.O. Box 431403		
			Address	
		South Miami, FL 33243		
			City/State and Zip Code	
		Joey@thelkanikgroup.com		
For furth	ner information ec	e-mail address: (i	to be used for future annual report notificall:	cation)
Joey M.	. McCall		888 8465880 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	d is a check for th	e following amount:		
■ \$25.	00 Filing Fee	S30.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Inner Circle Empire, PLLC		
(<u>Name of the Limited Li</u> (A F	iability Company as it now appears on our rec- lorida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Florida document number L170000200731	ity Company were filed on September 2	28, 2017 and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "L	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	<u> </u>	9
(Principal office address MUST BE A STREET AL	DDRESSį	B JUN ISION O
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>	N-7 PM 12: 56
B. If amending the registered agent and/or r registered agent and/or the new registered office	registered office address on our recoraddress here:	rds, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	
_	City	Florida 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

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>	Address	Type of Action
CEO	Joey M. McCall	P.O. Box 431403	□ A₫d
		South Miami, FL 33243	■ Remove
			Change
MGR	Alfreida Joseph-Goins	P.O. Box 431403	∃ Add
		South Miami, FL 33243	☐ Remove
		-	☐ Change
			Remove
			□ Change
			
			Remove
			Change
			Remove
			□ Add
		-	□ Remove
			Change

Please add Alfreida Jos	eph-Goins as Manac	er (MGR)			
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fective date, if other than t	he date of filing:	6/41	2018	(optional)	
n effective date is listed, the date	must be specific and canno	t be prior to date o	filing or more than 90	days after filing.) Pursuant to	o 605.020
ote: If the date inserted in this cument's effective date on the	Department of State's	records.	diory thing requires	nems, this date will not be	insieu a
record specifies a delay The 90th day after the r	ed effective date,	but not an ef	fective time, at	12:01 a.m. on the e	arlier d
the 90th day after the r	ecora is filea.				
June 4th	_201	18	12		
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	- //	10-11			
	Jeffly-1	-	-10-0-		
	Signature of a member	rot authorized rep	presentative of a memb	oer	_

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Filing Fee: \$25.00