## L19 000304242

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S. YOUNG

Gracielle Willberg 55 SW 9<sup>th</sup> St. Apt 3005 Miami FL 33130

To whom it may concern.

My name is Gracielle Willberg, the registered agent of Gracielle Willberg LLC (document number L19000304242). This cover letter serves to inform you that I would like to amend my LLC to a PLLC for the purpose of providing legal services and engaging in the practice of law. The new name shall be Gracielle Willberg, PLLC. Please also update the mailing address and the principal address to: 55 SW 9<sup>th</sup> St. APT 3005 Miami FL 33130. This is also my return address. My daytime telephone number is (954) 446-4332.

Kind Regards.

Gracielle Willberg Esq.

## **COVER LETTER**

TO:

	Registration Sec Division of Corp			
eud ire		illberg, LLC.		
SUBJEC	.l;	Name of Limi	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Picase re	turn all correspon	ndence concerning this matter	to the following:	
		Gracielle Willberg		
			Name of Person	<u> </u>
		Gracielle Willberg, LLC		
<del></del>			Firm/Company	
55 SW 9th St. APT 3005				
Address				
		Miami, FL 33130		
		<del></del>	City/State and Zip Code	
		gwill0889@gmail.com	to be used for future annual report noti	Footion)
For furth	er information co	oncerning this matter, please ca		ication)
Gracielle	e Willberg		954 446-4332	
Name of Person			at () Area Code Daytim	e Telephone Number
Enclosed	I is a check for th	ne following amount:		
<b>≡</b> \$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 Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gracielle Willberg, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(A Florida Lim	nited Liability Company)
The Articles of Organization for this Limited Liability Comp. Florida document number $\frac{L19000304242}{L19000304242}$ .	pany were filed on December 13, 2019 and assigned
Florida document number	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
Gracielle Willberg, PLLC	
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	55 SW 9th St. APT 3005 Miami FL 33130
(Principal office address MUST BE A STREET ADDRESS	<u>S</u> )
	<del></del>
	55 SW 9th St. APT 3005 Miami FL 33130
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	fice address on our records, <u>enter the name of the new registered</u>
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address: 55 SW 9th	St. APT 3005
	Enter Florida street address
Miami	, Florida 33130
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered Agent's Agent's Signature, if changing Registered R	<u>ent:</u>

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
MGR	Gracielle Willberg	55 SW 9th St. APT 3005 Miami FL 33130	<b>=</b> Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
<del></del>			🗆 🗆 Add
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			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) State of Purpose: Legal Services Please amend Gracielle Willberg from AR to MGR (optional) E. Effective date, if other than the date of filing: (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.

ET 635.00

Signature of a member or authorized representative of a member

Gracielle Willbing
Typed or printed name of signee