

L20000125536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

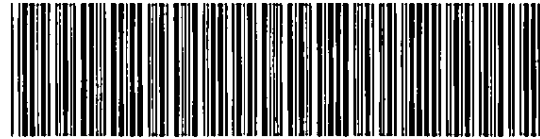
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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O SIMMONS

NOV 13 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SIMCOVICH, VALDEZ & WHALEN LLC

SUBJECT: _____
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:

GERMAN D. SIMCOVICH

Name of Person

SIMCOVICH & WHALEN LLC

Firm/Company

7610 HARDING AVENUE OFFICE

Address

MIAMI BEACH, FL 33141

City/State and Zip Code

HELLO@SIMCOVICHWHALEN.COM

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

For further information concerning this matter, please call:

GERMAN D. SIMCOVICH

786

5-479376

at (_____) _____

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

130 - 7:30

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

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

MIAMI BEACH, FL. 33139

MIAMI BEACH, FL. 33139

Zip Code

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

11:00 AM 7:00

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SIMCOVICH & WHALEN LLC	7610 HARDING AVE	<input checked="" type="checkbox"/> Add
		OFFICE	<input type="checkbox"/> Remove
		MIAMI BEACH, FL 33141	<input type="checkbox"/> Change
CEO	SIMCOVICH, GERMAN D	900 6TH ST APT 17	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
COO	WHALEN, GEORGIA	900 6TH ST APT 17	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

7:00 - 7:30

E. Effective date, if other than the date of filing: 10/02/2020 (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 OCTOBER 2nd 2020

Signature of a member of authorized representation

GERMAN D. SIMCOVICH

Typed or printed name of signee

Filing Fee: \$25.00