

L20000 177 191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2020 OCT -7 AM 11:57

RECEIVED OF S.M.
1138 OF COOPERATION
11 AM 11:57 AM 11:57

OCT 19 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 SEP 11 11:06

September 11, 2020

CHARLES BRADY
CHARLES BRADY LAW LLC
6740 CROSSWINDS DRIVE N STE G
ST PETERSBURG, FL 33710

SUBJECT: CHARLES BRADY LAW LLC
Ref. Number: L20000177191

We have received your document for CHARLES BRADY LAW LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia S Young
Regulatory Specialist II

Letter Number: 020A00017341

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHARLES BRADY LAW PLLC
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:

CHARLES BRADY
Name of Person

CHARLES BRADY LAW PLLC
Firm/Company

6740 CROSSWINDS DR N SUITE G
Address

ST. PETERSBURG FL 33710
City/State and Zip Code

CHARLES @ CHARLES BRADY LAW . COM
E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call:

CHARITY BRADY at (727) 212 1378
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

CHARLES BRADY LAW 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 JUNE 24, 2020 and signed
Florida document number L 20000 177 191

This amendment is submitted to amend the following:

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

CHARLES BRADY LAW 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 607, 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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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

SPECIFIC PURPOSE OF ENTITY : AMENDMENT :
Please change name of Limited
liability company to CHARLES
BRADY LAW PLLC.

Thank you.

Business Purpose - To provide legal
services to businesses, small & large,
as well as individuals in need.

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 date of: (b) The 90th day after the record is filed.

Dated October 2nd, 2020


Signature of a member or authorized representative of the entity

Charles Brady
Typed or printed name of the entity