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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

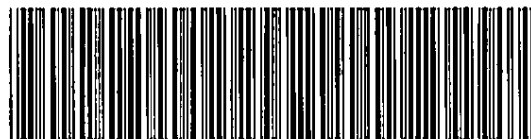
(Business Entity Name)

(Document Number)

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2020 SEP 29 AM 10:25
CLERK OF STATE
TALLAHASSEE, FL

92 11/5/20

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: JOANNE J. BROWN, 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:

JOANNE J. BROWN

Name of Person

JOANNE J. BROWN, PLLC

Firm/Company

5449 GRANDE PALM CIR

Address

DELRAY BEACH, FL 33484

City/State and Zip Code

jbsellsflorida2@gmail.com

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

For further information concerning this matter, please call:

JOANNE J. BROWN

at (561) 501-1563
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input 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

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	JOANNE J. BROWN	5449 GRANDE PALM CIR	<input type="checkbox"/> Add
		DELRAY BEACH, FL 33484	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JO ANNE J. BROWN	5449 GRANDE PALM CIR	<input checked="" type="checkbox"/> Add
		DELRAY BEACH, FL 33484	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2020 SEP 28 AM 10:26
CLERK OF STATE
TALLAHASSEE, FL

2020 SEP 29 AM 10:29
CLERK OF STATE
TALLAHASSEE, FL

2020 SEP 29 AM 10:26
TREASURY OF STATE
TALLAHASSEE, FL

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(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)

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.

2020

Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00