

L22000190506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

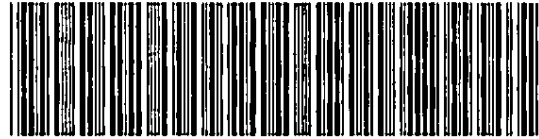
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2022 AUG 22 PM 2:20

J DENNIS  
NOV 08 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CHAVEZ ENTERPRISES LLC

\_\_\_\_\_  
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:

PATRICIA CHAVEZ

\_\_\_\_\_  
Name of Person

CHAVEZ ENTERPRISES LLC

\_\_\_\_\_  
Firm/Company

4403 VENUS AVE

\_\_\_\_\_  
Address

WEST PALM BEACH, FL 33406

\_\_\_\_\_  
City/State and Zip Code

ChavezD223@yahoo.com

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

For further information concerning this matter, please call:

Patricia Chavez

\_\_\_\_\_  
Name of Person

at (561)

Area Code

951-3448

\_\_\_\_\_  
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



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>
MGR	Victor Chavez	4403 Venus Ave	<input checked="" type="checkbox"/> Add
		West Palm Beach, FL 33406	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Patricia Chavez	4403 Venus Ave	<input type="checkbox"/> Add
		West Palm Beach, FL 33406	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

[illegible]

(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)

Dated August 17 2022

*[Handwritten signature]*

PATRICIA CHAVEZ

Typed or printed name of signee