

L24000459723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

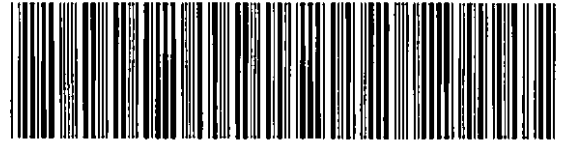
Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE

NOV - 5 2024

Office Use Only



300439047513

2024 NOV - 4 PM 4:21
RECEIVED
TALLAHASSEE, FLORIDA

2024 NOV - 4 PM 4:21
RECEIVED
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC

(850) 574-5437

2330 CLARE DR

(850) 574-6243

TALLAHASSEE, FL 32309

(850) 574-9625

Please use funds from this account: 1202 000160: \$25.00

Authorization Signature: *James Hill*

Business Name: ADVANCED IR LLC

Document# L24000459723

☐ Certified Copy

☐ Certificate of Status

NEW FILINGS

☐ Profit Corp

☐ Not for Profit

☐ Limited Liability

☐ Domestication

☐ LLLP

☐ CORP

☐ Other

☐ Other

OTHER FILINGS

☐ Apostille

Country

AMMENDMENTS

☒ Amendment

☐ Resignation of F.A. Officer / Director

☐ Change of Registered Agent

☐ Revocation of Dissolution

☐ I/O

☐ Amendment of Certificate

☐ Resignation of Officer / Director

☐ Statement of Financial Condition

REGISTRATION/CERTIFICATE APPLICATIONS

☐ Initial Registration

☐ Renewal Application

☐ Statement of Financial Condition

☐ Resignation of Officer / Director

☐ Amendment of Certificate

EXAMINER'S INITIALS: _____

6.2 = 437

105. a - 8243

8-9625

Authorization Signature: James Hill

Document# L24000459723

Certificate of Status

ANNEXMENT

X = 1

Respectfully,
 _____, Chief, Director

_____ Corp. Dec 31, 1963

Fig. 1. η_{sp}/c vs. c for solution.

10

_____ SIC _____

1997 721 25 100 1.23

1. 2. 3.

REC- 110 15057 42

1. *Journal of the American Medical Association*, 1997; 278: 1039-1044.

EXAMINER'S INITIALS:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ADVANCED IR 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:

RITEESH KAUSHAL

Name of Person

Firm/Company

1782 SW 132ND WAY

Address

DAVIE, FL 33325

City/State and Zip Code

CORETHINKER1@GMAIL.COM

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

For further information concerning this matter, please call:

ELIZABETH GINORI

561 323-6511
at ()

Name of Person

Area Code

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)

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 Center
2-15 N
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2011-04-27 10:52

ADVANCED IR LLC

(Name of the Limited Liability Company, as a LLC,
A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed with the
Florida document number L24000459723

This amendment is submitted to amend the following:

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

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

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, or registered office address, or both, 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:

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and complete performance of my position as registered agent as provided in the Florida Statutes. If the change being filed to merely reflect a change in the registered office address, the change in the company has been notified in writing to the change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the name of the person added or removed from our records:

[illegible]

D. If amending any other information, enter change(s) here: (attach separate sheet)

[illegible]

E. Effective date, if other than the date of filing: 11/4/2024

(If an effective date is listed, the date must be specific and cannot be prior to date of birth.)

Note: If the date inserted in this block does not meet the applicable statute, 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, the record is filed.

Dated November 4th 2024

Signature of a member or authorized representative

W. M. M. M. M.
Typed or printed...

[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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (a) the 90th day after the record is filed.

Signature of a member or authorized representative of a member

Filing Date: 5/2/2010