

(Re	equestor's Name)	
(, , _	, 4.00.01.01.01.00.00,	
(Ad	ldress)	
(,	
(Ad	ldress)	
·	•	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

200329388292

200329388292 05/24/19--01013--010 **25.00

2819 HAY 24 P 12: 50

JUN 11 0013

ī. L.

COVER LETTER

•	gistration Section vision of Corporations		
SUBJECT	Chase Law, LLC (cross ref: Chase	 Law Litigation, LLC) Doc: M19000001219	
	Name of Limited Liability Company		
Dear Sir or	Madam:		
The enclose	ed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.	
Please retur	m all correspondence concerning this matter	to the following:	
Kenneth I	E. Chase		
	Name of Person		
Chase La	w, LLC		
· · · · · · · · · · · · · · · · · · ·	Firm/Company		
6990 Indi	an Creek Drive		
	Address		
Miami Be	ach, FL 33141		
-	City/State and Zip Code		
kchase@	chaselaw.com		
E-mai	l address: (to be used for future annual repor	t notification)	
For further	information concerning this matter, please c	 a 1 : 	
Kenneth E	E. Chase at (] 02 365-5130	
	Name of Person	Area Code & Daytime Telephone Number	
Reg Div Clii 266 Tal	REET/COURIER ADDRESS: gistration Section rision of Corporations fton Building 1 Executive Center Circle lahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	closed is a check for the following amount		
	325 Filing Fee	S55 Filing Fee & Certified Copy	
INHS18 (2/1	4)		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

r)	(b)	
Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	' ' 1	Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX)
6990 Indian Creek Drive		0 Indian Creek Drive
Miami Beach, FL 33141	Mia	mi Beach, FL 33141
12/27/2019	M190	000001219
Date of filing/registration in Florida	4.	Document number
(a) Kenneth E. Chase		
Registered Office Address (MUST BE FLORIDA S	STREET ADDRESS)	
000 445.000 0 46.000 0 4 4 0 0 4 0		
820 Arthur Godfrey Road, Suite 212 Miami Beach	33140	
Miami Beach b) Kenneth E. Chase	, ri	AY 24 F
Miami Beach Kenneth F. Chase	, ri	MALLAHASATE TUSKA
Miami Beach b) Kenneth E. Chase	, ri	5 5 5 CF
Miami Beach Kenneth E. Chase Enter name of NEW Registered Agent and/or NEW R	, ri	5 5 5 CF

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

10TE-Lec	Kenneth E. Chase
Signature of a member or authorized representative of a member	Printed or typed name of signee

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 605, 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.

Signature of Registered Agent