#1/10000029539

(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:

Office Use Only



200198929242

03/24/11--01024--019 **25.00

17 MAR 24 PH 4: 26

SECURITIES OF STATE

AND THE SECURITIES OF STATE

AND THE SECURITIES OF STATE

THE SECURITIES OF STAT

EXAMINER
MAR 25 2011

COVER LETTER

Division of C	Corporations		
SUBJECT:	MID FLORIDA	COUNSELING, PLLC	
		ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	MAF	RBEL FREAY LOCARNO	
		Name of Person	
	MID FL	ORIDA COUNSELING, LLC	;
		Firm/Company	
	80	03 DEER WOODS RD	
		Address	
	CE	LEBRATION, FL 34747	
		City/State and Zip Code	
	F-mail address: (ay.locarno@gmail.com to be used for future annual report notific	eation)
For further information	on concerning this matter, please of	·	,
MARBE	EL FREAY LOCARNO	at (_407_)	744-4774
	ne of Person	Area Code & Daytime	
Enclosed is a check for	or 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)
MA	H INC ADDRESS.	STDEET/COUDII	ED ANNDESS.

Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section

Tallahassee, FL 32314

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

11 MAR 24 PM 4: 26

ECOL LARY DE STATE

MID FLORIDA COUNSELING, PLLC

(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 Compa	any were filed on	3/10/2011	and assigned
Florida document number	L11000029539			
This amendment is submitted to	amend the following:			
A. If amending name, enter the	e new name of the limited l	iability company here:	•	
		OUNSELING, LLC		
The new name must be distinguishau"L.L.C."	ble and end with the words "L	imited Liability Company	," the designation "I	LC" or the abbreviation
Enter new principal offices add	ress, if applicable:			
(Principal office address MUST	BE A STREET ADDRESS	<u> </u>		
		 	· · · · · ·	
Enter new mailing address, if a	nnlicable			
(Mailing address MAY BE A PC	- -			
Induling damess MAT BE AT C	SI OFFICE BOX			
			· · · · · · · · · · · · · · · · · · ·	
B. If amending the registere registered agent and/or the new			r records, <u>enter t</u>	he name of the new
registered agent and/or the nev	registered office address i	nerę.		
Name of New Registere	ed 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 608, 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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

	<u>Name</u>	Address	Type of Acti
			Add
			Remove
			Remove
			
			Add Remove
		·	
			Remove
			= _n
'amen	ding any other information or	ater change(s) here: (Attach additional shee	
	ang any other morniadon, en	ter change(s) here. (Anach auamonai shee	
_			· · · · · · · · · · · · · · · · · · ·
_		·	<u> </u>
	March 22	_,2011	
	Ma	, 2011. Welfrey Leman of a member of a uthorized representative of a me	

Page 2 of 2

Filing Fee: \$25.00