

L14000055062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP    WAIT    MAIL

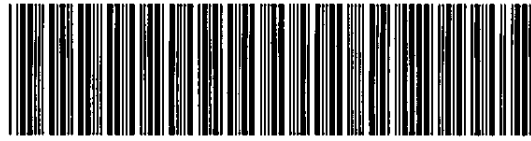
(Business Entity Name)

(Document Number)

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2014 MAY - 8 PM 4: 11  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE

MAY 19 2014  
D. BRUCE

LAW OFFICES OF JAMES J. ALTMAN, SR.

5614 Grand Boulevard  
New Port Richey, Florida 34652

Robert N. Altman  
Thomas P. Altman

Telephone (727) 848-8435  
Fax (727) 847-2750  
e-mail: altmanlaw@raltmanlaw.com

May 14, 2014

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

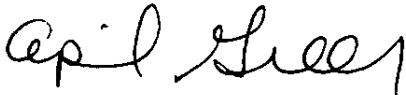
Re: Here and Now Hypnosis, LLC

Dear Sir or Madam:

Enclosed at this time please find the completed Articles of Amendment pursuant to your letter dated May 7, 2014. Please process the Amendment and forward all future correspondence to Mrs. Kitson.

Thank you kindly for your assistance in this matter.

Sincerely,



April Greer  
Florida Registered Paralegal

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2014 MAY - 8 PM 4: 11  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 7, 2014

MELISA KITSON  
9100 HUNT CLUB LANE  
PORT RICHEY, FL 34668

SUBJECT: HERE & NOW HYPNOSIS, LLC  
Ref. Number: L14000055062

We have received your document for HERE & NOW HYPNOSIS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list your changes in the appropriate spaces on the form.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 214A00009746

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Here & Now Hypnosis, 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:

**Melisa Kitson**

Name of Person

Firm/Company

**9100 Hunt Club Lane**

Address

**Port Richey, FL 34668**

City/State and Zip Code

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

For further information concerning this matter, please call:

**Meilsa Kitson**

Name of Person

at **727 514-1641**

Area Code

Daytime Telephone Number

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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/COURIER ADDRESS:**

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Here & Now Hypnosis, LLC

(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 Company were filed on 04/03/14 and assigned Florida document number L14000055062.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Melisa Kitson

New Registered Office Address:

9100 Hunt Club Ave.

Enter Florida street address

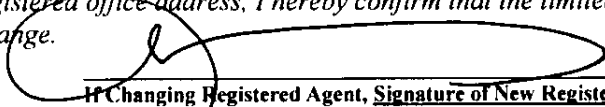
Port Richey, Florida 34668

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 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.*

  
\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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	Melissa Kitson	9100 Hunt Club Lane	<input type="checkbox"/> Add
		Port Richey, FL 34668	<input checked="" type="checkbox"/> Remove
MGR	Melisa Kitson	9100 Hunt Club Lane	<input checked="" type="checkbox"/> Add
		Port Richey, FL 34668	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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 TALLAHASSEE FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

The only item that is being amended is the spelling of the  
registered agent and manager's name: Correct spelling  
Melisa D. Kitson (previoulsy spelled incorrectly as  
Melissa D. Kitson)

E. Effective date, if other than the date of filing \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 04/28/14

*Robert N. Altman*

Signature of a member or authorized representative of a member

Robert N. Altman, Atty. for Melisa D. Kitson

Typed or printed name of signee

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Filing Fee: \$25.00

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