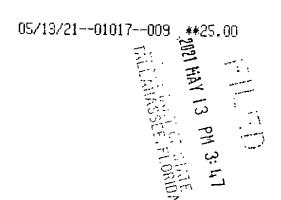
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COVER LETTER

TO:	Registratio Division of	n Section Corporations	3			
SUBJEC		liverwalk LLC				
ODJE.	ω ι.	Name of Lin	nited Liability Company			
		s of Amendment and fee(s) are sub	_			
Please re	aturn all corr	respondence concerning this matter	to the following:			
		Cristie 1. Smith				
			Name of Person			
		Success Behavioral Holdin	igs LLC			
			Firm/Company			
		1555 Palm Beach Lakes B	lvd Ste 1105			
			Address			
		West Palm Beach, FL 334	901			
		ap@successtms.com	City/State and Zip Code			
		E-mail address: (to be used for future annual report notifi	cation)		
For furth	er information	on concerning this matter, please c	all:			
Cristie L	Smith		561 264-4406 x 23	23		
· _	Nar	me of Person	Area Code Daytime	Telephone Number		
Enclosed	is a check f	or the following amount:				
■ \$25.0	00 Filing Fed	e \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Add	dress:	Street Address:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

6214 Riverwalk LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 11/07/2016	and assigned
Florida document number 1.16000204423		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ility company here:	
Success Behavioral Holdings LLC		2021 TAI
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation I. L.C.".
Enter new principal offices address, if applicable:	1555 Palm Beach Lakes Blvd STF	1105
(Principal office address MUST BE A STREET ADDRESS)	West Palm Beach, FL 33401	P 1
Enter new mailing address, if applicable:	Same as Principal Office	FEORIBA 1
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Floric	la

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.

City

Zip Code

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>	Address	Type of Action
		-	□Add
			□Remove
			□ Add
			AYChange
			Remove HAND Change
			PRod 3: 1-10RID
			□Change
			□Add
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ective date, if other than the n effective date is listed, the date muster. If the date inserted in this ble	be specific and cannot be p	rior to date of filing o	r more than 90 days af	her filing) Pursuant to 605.029
cument's effective date on the De	partment of State's reco	rds.	iong requirements, t	ms date with not be fisted a
ecord specifies a delayed effective	date, but not an effective	e time, at 12:01 a.r	n. on the earlier of:	(b) The 90th day after th
s filed.				
ted May 10	2021			
	· 7	/		
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	Signature of a member or a	uthor red representat	ive of a member	

Filing Fee: \$25.00