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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

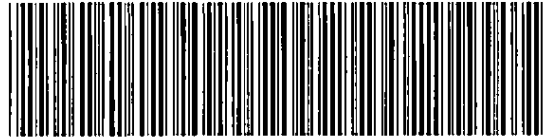
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WALKIE TALKIE THERAPY 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:

Johanna Rose Engenio
Name of Person

WALKIE TALKIE THERAPY LLC
Firm/Company

616 Clearwater Park Rd Apt #1204
Address

West Palm Beach, FL 33401
City/State and Zip Code

speech@johannaengenio.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Johanna Engenio at (850) 321-9347
Name of Person Area Code Daytime 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)

☐ \$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 Address:

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

Waikie Talkie Therapy LLC

(Name of the entity in which the amendments are being made. If the entity is a limited liability company, the name must include "LLC" or "Limited Liability Company".)

The Articles of Organization for this limited liability company were filed on 02/24/2022 and assigned Florida document number 88-1338685

This amendment is submitted to amend the following:

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

Communication Corner Therapy LLC

The new name must be distinguishable from the name of any other entity registered with the Secretary of State. The designation "LLC" or the abbreviation "LLC" must be included.

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 file with records, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office:

Street address

Florida

Zip Code

New Registered Agent's Signature: _____ **Print Name:** _____

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 in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered agent, I hereby confirm that the limited liability company has been notified in writing of this change.

Changing Registered Agent: Signature of New Registered Agent

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> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|--|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| | | _____ | <input type="checkbox"/> Remove |
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| | | _____ | <input type="checkbox"/> Change |

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

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated December 1 2023

Signature of a member

Signature of a member or authorized representative of a member

Johanna Engelen

Typed or printed name of signee