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COVER LETTER

TO: Registration Section Division of Corpo			
SUBJECT: Institute	e of Family Studie	es, LLC	
SUBJECT.		mited Liability Company)	·
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
K	atherine M. Os	ses	فہ رے
	(1	Name of Person)	
<u> </u>	stitute of Family		TOUS SEP 16 AM 9: 23
	(Firm/Company)	7555 6
1	08 Robin Road	, Suite 2006	F. 2. 0
		(Address)	log c
Α	.ltamonte Sprin	as. FL 32701	O H
		State and Zip Code)	
For further information co	ncerning this matter, please o	call:	
Katherine	M. Oses	at (407) 376-	-0225
	(Name of Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a check for the fo	illowing 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)
Registra	NG ADDRESS:	STREET/COURING Registration Section	n
Division of Corporations P.O. Box 6327 Taliahassee, FL 32314		Division of Corpora Clifton Building 2661 Executive Ce	
i ananas	300, 112 32314	ZOUT EXECUTIVE CEL	THET CHOIC

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		Institute of Family Studies, LLC	
		(Present Name) (A Florida Limited Liability Company)	STORY OF THE
		•	FILE 9:29
FIRST:	The Articles of document num	of Organization were filed on July 18, 2005 and assigned other L05000072771	1, 29 FLORIDA FLORIDA
SECOND:	This amendme	ent is submitted to amend the following:	
	Registere	ed Managers Change	
	MGRM	Sean P. Jennings, Psy.D., Inc.	
	····	108 Robin Road, Suite 2006	
	<u></u>	Altamonte Springs, FL 32701	
	MGRM	Advanced Psychological Associates, Inc.	
		5415 Lake Howell Road, #203	
		Winter Park, FL 32792	
Dated	9/13/0	05	
		Signature of a momber or authorized representative of a member	
		Katherine Osos	

Filing Fee: \$25.00