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COVER LETTER

	ation Section n of Corporations
SUBJECT:	(Name of Limited Liability Company)
	ticles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following:
ricase teunii an	Dr. Emily Ptaszer
	(Name of Person) Lake Mai y. PSijchology, LLC = 50 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	(City/State and Zip Code)
For further infor	mation concerning this matter, please call:
<u> </u>	(Name of Person) at (407) 314 1(250) (Area Code & Daytime Telephone Number)
Enclosed is a chec	k for the following amount: Tee \$\int_{\text{S30.00 Filing Fee & Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \int_{S60.00 Filing Fee, Certified Copy (additional cop

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

(Present Name)
(A Florida Limited Liability Company)

Winter Park Psychology, LCC

FIRST:	The Articles of Organization were filed on Jone 26, 2000 and assigned document number 6000064172.	2006	· · · · · · · · · · · · · · · · · · ·
	This amendment is submitted to amend the following:		11
1)	name of winter Park Psychology CLC "	8	
	is to be done away with AND CHARE	ed	
-	D.	77.7	
	LAKEMARY PSYChology, LLC	T F	
2) address changed to the Following		
	2500 W- Lake mary Blod		. :
	Suite # 220		
	Lake mary FL 32746		
Dated	July 13, 20th.		
	an almandar		
	Signature of a member or authorized representative of a member		·
	Emily Plaszer		
Typed or printed name of signee			•

Filing Fee: \$25.00