

LO9 000074716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

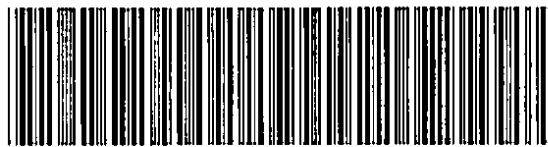
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RECEIVED
DIVISION OF CORPORATIONS
ALABAMA SECRETARY OF REVENUE

2020 SEP 21 AM 6:48

FILED

OCT 28 2020

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: In Balance Rehab, 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:

Megan Stone

Name of Person

Firm/Company

109 Cleveland Avenue

Address

Cocoa Beach, FL 32931

City/State and Zip Code

stoneM25@gmail.com

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

For further information concerning this matter, please call:

Megan Stone

Name of Person

at (321) 412-5220

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**

IN BALANCE REHAB, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2009 SEP 21 PM 6:48
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA

The Articles of Organization for this Limited Liability Company were filed on August 18, 2009

and assigned

Florida document number L09000079716

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 contain 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: Megan Stone

New Registered Office Address: 109 Cleveland Avenue

Enter Florida street address

Cocoa Beach

City

Florida 32931

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

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>
MGRM	KIMBERLY A. SCALES	109 CLEVELAND AVENUE	<input type="checkbox"/> Add
		COCOA BEACH, FL 32931	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MEGAN STONE	109 CLEVELAND AVENUE	<input checked="" type="checkbox"/> Add
		COCOA BEACH, FL 32931	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MICHAEL NICHOLS	109 CLEVELAND AVENUE	<input checked="" type="checkbox"/> Add
		COCOA BEACH, FL 32931	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

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.

Megan Stone

Typed or printed name of signee