

U09000087742

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

SEP - 8 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Momentum Counseling, PLLC
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:

Dawn Lindner DiRito

Name of Person

Momentum Counseling

Firm/Company

320 North First Street, Suite 613

Address

Jacksonville Beach, Florida 32250

City/State and Zip Code

drlindner@live.com

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

For further information concerning this matter, please call:

Dawn Lindner DiRito

Name of Person

at (941)

626-6164

Area Code & Daytime Telephone Number

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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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Momentum Counseling, PLLC

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

The Articles of Organization for this Limited Liability Company were filed on September 11, 2009 and assigned Florida document number L09000087742.

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 end with 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)

320 North First Street

Suite 613

Jacksonville Beach, Florida 32250

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

320 North First Street

Suite 613

Jacksonville Beach, Florida 32250

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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:

Vincent J. DiRito

New Registered Office Address:

320 North First Street, Suite 613

Enter Florida street address

Jacksonville Beach

City

, Florida

32250

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Dawn Lindner DiRito	320 North First Street Suite 613 Jacksonville Beach, Florida 32250	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Dawn Michelle Dwyer	18245 Paulson Drive Port Charlotte, Florida 33954	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

2010 SEP - 7 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Dated September 2, 2010

Dawn L DiRito
Signature of a member or authorized representative of a member

Dawn L DiRito
Typed or printed name of signee