

L11000079273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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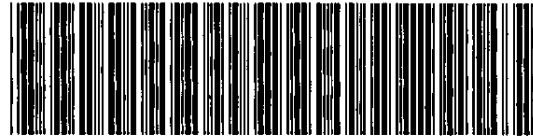
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
JAN 24 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ImageMatters Counseling & Consulting

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:

Guy C. Jeanty

Name of Person

Jeanty Counseling & Consulting

Firm/Company

4801 S. University Drive, Suite 249

Address

Davie, FL 33328

City/State and Zip Code

drjlmft@gmail.com

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

For further information concerning this matter, please call:

Guy C. Jeanty

954 895-1960
at () Area Code Daytime Telephone Number

Name of Person

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

IMAGEMATTERS COUNSELING & CONSULTING, 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 July 8, 2011 and assigned
Florida document number L11000079273.

This amendment is submitted to amend the following:

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

Jeanty Counseling & Consulting, LLC

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:

4801 S. University Drive, Suite 249

(Principal office address MUST BE A STREET ADDRESS)

Davie, FL 33328

Enter new mailing address, if applicable:

4801 S. University Drive, Suite 249

(Mailing address MAY BE A POST OFFICE BOX)

Davie, FL 33328

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:

Guy C. Jeanty

New Registered Office Address:

4801 S. University Drive, Suite 249

Enter Florida street address

Davie

City

Florida

33328

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>
MGR	Guy C. Jeanty	4801 S. University Dr., Suite 249	<input checked="" type="checkbox"/> Add
		Davie, FL 33328	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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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.

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STATE
FLORIDA

2:01


Signature of a member or authorized representative of a member

Guy C. Jeanty

Typed or printed name of signee