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## **COVER LETTER**

	Registration Se Division of Cor		•		••		
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SUBJEC		Name of Lim	Name of Limited Liability Company				
The encid	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please ref	turn all correspo	ondence concerning this matter	to the following:				
		Guy C. Jeanty					
			Name of Person	· · · -			
		Jeanty Counseling & Cons	ulting. LLC				
			Firm/Company		<del></del>		
1451 W. Cypress Creek Road, Suite 300						<b>4</b> 07	
			Address		<del></del>		
Fort Lauderdale, FL 33309							
City/State and Zip Code  DRJLMFT@GMAIL.COM  E-mail address: (to be used for future annual report notification)					_ (SS) - (SS)	<u> </u>	Ì
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For furth	er information c	n-mail address: ( concerning this matter, please co	·	no(ilication)	FL	PH 8: 44	
Guy C. J	eanty		954 895-196	0			
	Name o	of Person	at () Area Code Da	ytime Telephone Num	ber		
Enclosed	Lis a check for th	he following amount:					
□ \$25.00 Filing Fee			☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi Certifi	00 Filing Fee. ificate of Status & ified Copy itonal copy is enclosed)		
	Mailing Address Registration		Street Addres Registration				
Registration Section Division of Corporations P.O. Box 6327				Corporations			
			The Centre of Tallahassee				

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jeanty Counseling & Consulting, LLC (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  $\frac{07/08/2011}{1}$ and assigned Florida document number \_\_111000079273 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: JEANTY COACHING & 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: (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: New Registered Office Address: Enter Florida street address , Florida \_ City

## 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

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Filing Fee: \$25.00