

L11000113189

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

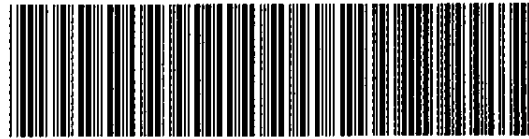
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2011 DEC -9 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
DEC 12 2011
EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 5, 2011

CHRISTOPHER D. WATERS
COACHING, COUNSELING & CONSULTING, LLC
5342 HUNTINGWOOD CT.
SARASOTA, FL 34235

SUBJECT: COACHING, COUNSELING & CONSULTING, LLC
Ref. Number: L11000113189

We have received your document for COACHING, COUNSELING & CONSULTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 711A00027161

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COACHING, COUNSELING & CONSULTING, 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:

Christopher D. Waters

Name of Person

Coaching, Counseling & Consulting, LLC

Firm/Company

5342 Huntingwood Ct

Address

Sarasota, Florida 34235

City/State and Zip Code

Jth7@comcast.net

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

For further information concerning this matter, please call:

Christopher D. Waters

Name of Person

at (941)

Area Code & Daytime Telephone Number

799-0007

~~954-3700~~

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

COACHING, COUNSELING & CONSULTING, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 10/04/2011 and assigned
Florida document number L11000113189

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)

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:

Christopher D. Waters

New Registered Office Address:

5342 Huntingwood Ct /

Enter Florida street address

Sarasota

Florida

34235

City

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.

Christopher D. Waters X
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

Title	Name	Address	Type of Action
MGRM	Deborah A. Waters	5342 Huntingwood Ct Sarasota, Florida 34235	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated

12/8/11

Deborah A. Waters
Signature of a member or authorized representative of a member

Deborah A. Waters

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 DEC -9 PM 3:40

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