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DIVISION OF CORPORATIONS
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AUG 14 2012

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Aries O'Donnell Family Counseling, 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:

Charles D. Franken, Esquire

Name of Person

Charles D. Franken, P.A.

Firm/Company

600 South Pine Island Road, #203

Address

Plantation, FL 33324

City/State and Zip Code

colleen0920@aol.com

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

For further information concerning this matter, please call:

Charles D. Franken, Esq.

Name of Person

at (954)

476-7200

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/COURIER ADDRESS:

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

Law Offices of Charles D. Franken, P.A.

Attorneys at Law

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Southpointe Professional Center
600 South Pine Island Road, Suite 203
Plantation, FL 33324
Telephone (954) 476-7200

Nina E. Franken, Esq.
Frankenlaw@gmail.com

Colleen M. Franken
Business Manager
CFrankenlaw@gmail.com

August 10, 2012

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314
Attn: Registration Section

Re: Change of Corporate Name from
ARIES O'DONNELL FAMILY COUNSELING, LLC to
ARIAS & O'DONNELL FAMILY COUNSELING, LLC

Dear Sir/Madame:

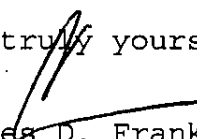
The undersigned is the corporate attorney for the above referenced Florida corporation. We hereby request that you amend the above Limited Liability Company name from ARIES O'DONNELL FAMILY COUNSELING, LLC to ARIAS & O'DONNELL FAMILY COUNSELING, LLC

We have enclosed an original and one (1) copy of the Articles of Amendment to that effect. This document has been signed by the authorized representative of said LLC.

We have enclosed our check in the amount of \$25.00 as the processing fee for changing this corporate name.

Thank you for your kind cooperation in this matter.

Very truly yours,


Charles D. Franken

CDF:CMF
C:\work\corp\secstate.chg
Enclosures (\$25.00)

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Aries O'Donnell Family Counseling, 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 July 24, 2012 and assigned Florida document number L12000095705.

This amendment is submitted to amend the following:

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

Arias & O'Donnell Family Counseling, LLC

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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.

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>
_____	_____	_____	<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 August 10, 2012

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Signature of a member or authorized representative of a member
Charles D. Franken, Esquire

Typed or printed name of signee