1300000 7046

(Re	questor's Name)			
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·		
(Ad	dress)			
·	,			
· · · · · · · · · · · · · · · · · · ·	o (Chaha (Zia (Dla au	- 40		
(CII	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Du	Siliess Elitity Hai	ne,		
(Do	cument Number)			
Certified Copies Certificates of Status				
Consist testing the second	Filing Off			
Special Instructions to	Filing Officer:			

Office Use Only



600276294396

08/24/15--01040--008 **25.00

15 AUG 24 AM IO 20

M. MILLIGAN EXAMINER

SEP - 2 2015

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Katherine Reener WA CCC/SLP, 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:
Ratherine Beiter Name of Person
Katherine Keener MA CCC/SCP, UC
200 East Reading Way
Winter Park, FL 32789 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (407) 283-9832 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status \$55.00 Filing Fee Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

Name of the Limited	Keenel Liability Compa Florida Limited I	M. H. CCC/ ny as it now appears on or liability Company)	SUP LLC ur records.)	27	
The Articles of Organization for this Limited Liabi	lity Company	were filed on $1/1$	4 2013	and assigned	
Florida document number <u>L13000070</u>	lolo.				
This amendment is submitted to amend the followi	ng:				
A. If amending name, enter the new name of th					
Katherine Beiter M.A. The new name must be distinguishable and contain the word	ecc/si	P, LLC		1 91.00	
The new frame must be distinguishable and contain the word	s Elmited Liabit				
Enter new principal offices address, if applicabl	e:	200 East K Winter Par	leading M	Day	
(<u>Principal office address MUST BE A STREET A</u>	(DDRESS)	Winter Par	K, PL	3789	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 2327 Winter Park, FL 32790-2327			
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of e address here	tice address on our	records, enter	the name of the new	
Name of New Registered Agent:					
New Registered Office Address:	200 E	OST React'r Enter Florida str Par K City	eet address		
-	Winter	Park	, Florida	32789	
		~ <i>n</i> ,		my come	

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 ame	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ngr_	Name Change - Katherine Reener (old)
-, -	Katherine Beiter (new)
_	address Change - 200 E Reding was
_	
_	Winter Park, FL 32789
_	
_	
_	
-	
_	
_	
_	
_	
_	
(If an eff Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	8/22/2015, 8:01.
	8/22/2015, 8:01. **Xan Bester** Signature of a member or authorized representative of a member
	Ratherine Beiter Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00