

L130000054621

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

AUG 19 2013

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Speech Essentials, 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:

Diana L. Wheeler

Name of Person

Firm/Company

1144 Beech Grove Way

Address

Orlando, FL 32828

City/State and Zip Code

dstella26@hotmail.com

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

For further information concerning this matter, please call:

Diana L. Wheeler

Name of Person

407 484-8882

Area Code & Daytime Telephone Number

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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**

Speech Essentials, 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 04/15/2013 and assigned Florida document number L13000054621.

This amendment is submitted to amend the following:

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

Essentials Therapy Services, 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)

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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
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2013 AUG 16 PM 12:43
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated July 31, 2013.

Diana Wheeler

Signature of a member or authorized representative of a member

Diana Wheeler

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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2013 AUG 16 PM 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Attn :
Barbara Bostick



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2013

DIANA L. WHEELER
1144 BEECH GROVE WAY
ORLANDO, FL 32828

SUBJECT: SPEECH ESSENTIALS, LLC
Ref. Number: L13000054621

2013 AUG 16 PM 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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We have received your document for SPEECH ESSENTIALS, 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 name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : ESSENTIAL THERAPY SERVICES INC., document number P07000010259.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

Please return 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) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 613A00018737

→ Thank you. We would like to file as Essentials Therapy Services, listed on the enclosed documents. Please call 407-484-8882 with any further questions.
Thanks, Diana Wheeler

www.sunbiz.org