## L14000087702

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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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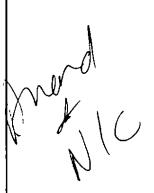


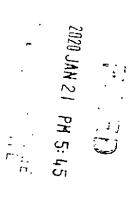
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## **COVER LETTER**

Div	ision of Cor	porations			
ann man		cessful Solutions, LLC			
SUBJECT:	-	Name of Limi	ted Liability Company		
The encloses	A articles of	Amendment and fee(s) are sub-	nitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Karen D. Griffith			
			Name of Person		
		Keys 2 Successful Solution	ns		
			Firm/Company		
	130 South Indian River Drive, Suite 202				
		<u></u>	Address		
		Fort Pierce, FL 34950			
			City/State and Zip Code		<del></del>
		karendenisegri02@gmail.cc		<del></del>	
			to be used for future annual re	eport nouncation)	
For further i	nformation c	oncerning this matter, please co	dl:		
Karen D. G	riffith		772 226	-0027	
Name of Person			Area Code	Daytime Telephone ?	Number
Enclosed is	a check for th	ne following amount:			
□ \$25.00 B	Filing Fee	S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed.	osed) Ce	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)
Re	ailing Addres	Section	•	tion Section	
Di	vision of C	orporations	Division	of Corporations	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

TO:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Keys 2 Successful Solutions, LLC					
(Name of the Limi	ted Liability Compa (A Florida Limited	inv as it now appears on our records.) Liability Company)		_	
The Articles of Organization for this Limited L Florida document number L14000087702	iability Company	were filed on June 2, 2014	and	l assigne	ed
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name o	of the limited liab	oility company here:			
Keys 2 Successful Solutions Coaching and Consu	lting, LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation	n "L.L.C.	
Enter new principal offices address, if applicable:		130 South Indian River Drive			
(Principal office address MUST BE A STREET ADDRESS)		Suite 202			
		Fort Pierce, FL 34950		1020	
			:"	020 JAN	.= ;=1
Enter new mailing address, if applicable:		130 South Indian River Drive	٠.	121	
(Mailing address MAY BE A POST OFFICE BOX)		Suite 202		70	1
	<del></del>	Fort Pierce, FL 34950		<u>بد</u> ان	
B. If amending the registered agent and/or agent and/or the new registered office addre	• •	address on our records, <u>enter the</u>	e name of the	new re	gistere
Name of New Registered Agent:	<del></del>				
New Registered Office Address:	130 South Indi	an River Drive, Suite 202			
		Enter Florida street address			
	Fort Pierce	Florida, Flo	da <u>34950</u>		
		City	Zip C	ode	

## 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Karen D. Griffith	130 South Indian River Drive	□Add
		Suite 202	□Remove
		Fort Pierce, FL 34950	<b>■</b> Change
			□Add
			□Remove
			□Change
			□Add
		~-	Remove
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			□Change
	<u></u>	<del></del>	□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing:			<u></u>			
fan effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020'  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d is filed.  Dated  January 16  2020  Signature of a heliber or authorized representative of a member						
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Signature of a thember or authorized representative of a member		date, but not an ef	fective time, at 1	2:01 a.m. on the e	earlier of: (b) The	90th day after the
	January 16	. 202	20			
	Jaron D.	ignature of a member	K r or authorized rep	presentative of a me	mber	·
		1				

Filing Fee: \$25.00