L15000120867

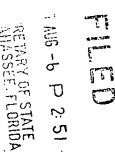
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

	on of Corpo					
M SUBJECT:	IIND MAST	ERY FOUNDATION LLC				
SUBJECT		Name of Limit	ed Liability Company			
The enclosed A	articles of A	mendment and fee(s) are subm	nitted for filing.			
Please return al	l correspond	lence concerning this matter to	o the following:			
		CHRISTINE MARGUILLI	ER			
			Name of Person			
	MIND MASTERY FOUNDATION LLC					
			Firm/Company			
	700 E DANIA BEACH BLVD STE 202					
			Address			
		DANIA FL 33004				
		IDCANIEMOVCCDADA CO	City/State and Zip Code			
		JDGANEM@VGCPAPA.CO	be used for future annual report notifier	ation)		
For further info	ormation con	cerning this matter, please cal	II:			
	Name of I	Person	at () Area Code Daytime T	elephone Number		
Enclosed is a c	heck for the	following amount:				
□ \$25.00 Fili	ing 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

MIND MASTERY FOUNDATION			
(Name of the Limite	<u>:d Liability Compan</u> (A Florida Limited Li	y as it now appears on our lability Company)	records.)
The Articles of Organization for this Limited Li Florida document number <u>L15000120867</u>		were filed on $\frac{07/14/2015}{}$	and assigned
This amendment is submitted to amend the follo			
A. If amending name, enter the new name of	the limited liabil	lity company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabili	ty Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	<u> </u>	
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>		A
B. If amending the registered agent and/registered agent and/or the new registered of			ecords, enter the name of th
Name of New Registered Agent:			
New Registered Office Address:			
		Enter Florida street	! address
			, Florida Zip Code
		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 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
Page 1 of 3

Page 1 of 3

Page 1 of 3

. 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>	<u>Address</u>	Type of Action
MGR	EMMIE VAZQUEZ	700 E DANIA BEACH BLVD	■ Add
		STE 202	□ Remove
		DANIA FL 33004	Change
			□ Add
			□ Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
			Remove
			Change
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			□ Remove
		RETARY OF STATE AHASSEE, FLORIDA	Change Change Remove
		ORIDA DRIDA	2. Change

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ective date, if other to effective date is listed, the te: If the date inserted cument's effective date	in this block does no	t meet the applica	able statutory tili	more than 90 day	(optiona s after filings, this da	ig.) Pursu	ant to 605.02 ot be listed
record specifies a The 90th day after			t an effective	time, at 12	:01 a.m	i. on th	e earlier
07/30 ted		2015					
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				a of a mambar	1320	ı	2
	Signature of	a member or author	orized representativ	e of a memoer	1328 10 783	o	

Page 3 of 3

Filing Fee: \$25.00