L15000137525

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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:	Janina B. Brandt, P	sy.D. LLC		
	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
		Dr. Janina B. Brandt		
		Name of Person		
	Jai	nina B. Brandt, Psy.D. LLC Firm/Company		
	-	9722 Clemmons Street Address		
		Parkland, FL 33076 City/State and Zip Code		
	F-mail address: (brandt@drjaninabrandt.com to be used for future annual report	notification)	
For further information of	oncerning this matter, please c	all:		
Janina	a Brandt	at (<u>954</u>)	861-0722	
Name o	f Person		ytime Telephone Number	
Enclosed is a check for the	he 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 Addres		Street Address		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 632	=	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Janina B. Brandt, Psy.D. LLC		
(<u>Name of the Limited Liability Company as it now ap</u> (A Florida Limited Liability Compa	pears on our records.) ny)	
The Articles of Organization for this Limited Liability Company were filed on	08/12/2015	and assigned
lorida document number L15000137525		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability company	<u>y here</u> :	
Janina B. Brandt, Psy.D. PLLC		
he new name must be distinguishable and contain the words "Limited Liability Company," t	he designation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:		2 2
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		6 23
		$\omega = \omega$
nter new mailing address, if applicable:		<u>: </u>
Mailing address MAY BE A POST OFFICE BOX)		
		<u></u>
. If amending the registered agent and/or registered office address on outent and/or the new resistered office address here: Name of New Registered Agent:	er records, <u>enter the na</u>	me of the new regi
New Registered Office Address:		
	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 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 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
			□Remove
			☐ Change
			□Add
			□Remove
			Change
			Add C 2 3 TRompio
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			□ Change
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			□Change
			□Add
			□Remove
			□ Changa

n on <u>ly seeking</u>	to amend the name of my	business from an LLC to	a PLLC. I am a Licer	nsed Clinical Psycho	ologist in private p
provide mental	Lhealth services such as th	erapy, assessment and	consultation to patier	nts	
					
					
					
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an effective date ote: If the date	if other than the date of is listed, the date must be speced inserted in this block does tive date on the Department.	ific and cannot be prior to d s not meet the applicable	late of filing or more tha	n 90 days after filing.)	
record specifies is filed.	s a delayed effective date, l	out not an effective time.	, at 12:01 a.m. on the	earlier of: (b) The	90th day after the
ated	August 16	. 2021	anto		
		re of a member or authorize	<u> </u>		