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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

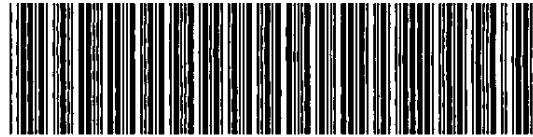
(Business Entity Name)

(Document Number)

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17 JUN -5 AM 7:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Guiding Change Psychotherapy 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:

William J. Roderick

Name of Person

Guiding Change Psychotherapy LLC

Firm/Company

P.O. Box 52284

Address

Sarasota, FL 34232-0319

City/State and Zip Code

william@gc-psychotherapy.com

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

For further information concerning this matter, please call:

William J. Roderick

941 961-4745
at ()

Name of Person

Area Code

Daytime Telephone Number

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**

Guiding Change Psychotherapy 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 September 2, 2015 and assigned
Florida document number L15000150633.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

5049 Ringwood Mdw

Ste A

Sarasota, FL 34235

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 52284

Sarasota, FL 34232-0319

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:

William J. Roderick

New Registered Office Address:

5049 Ringwood Mdw. Ste. A

Enter Florida street address

Sarasota

Florida

City

34235

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

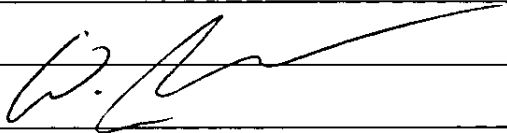
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	William J. Roderick	5049 Ringwood, Mdw. Ste. A, Sarasota, FL 34231	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	William Rodriguez Jr.	1916 Wyndham Dr. Sarasota, FL 34231	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Please change OWNER due to LEGAL NAME CHANGE. Court document of legal name change enclosed.

Former name: William Rodriguez Jr.

New legal name: William James Roderick



FILED
17 JUN -5 AM 7:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

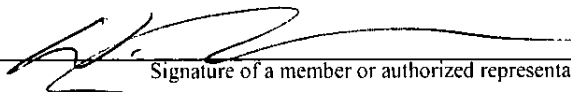
E. Effective date, if other than the date of filing: 05/26/2015 **(optional)**

(If an 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated June 1, 2017.



Signature of a member or authorized representative of a member

William J. Roderick

Typed or printed name of signee

IN THE CIRCUIT COURT OF THE TWELFTH JUDICIAL CIRCUIT,
IN AND FOR SARASOTA COUNTY, FLORIDA

Case No.: 2015 DR 5151 NC
Division: FAMILY 1

IN RE: THE NAME CHANGE OF

WILLIAM RODRIGUEZ, JR.

Petitioner,

FINAL JUDGMENT OF CHANGE OF NAME (ADULT)

This cause came before the Court on 05/26/2016, for a hearing on Petition for Change of Name (Adult) under section 68.07, Florida Statutes, and it appearing to the Court that:

1. Petitioner is a bona fide resident of Sarasota County, Florida;
2. X Petitioner's fingerprints have been taken by a law enforcement agency in compliance with the statute.
 No fingerprints have been taken because the former name of the petitioner is being restored.
3. Petitioner's request is not for any ulterior or illegal purpose; and
4. Granting this petition will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise; it is

ORDERED that Petitioner's present name, WILLIAM RODRIGUEZ, JR. is changed to WILLIAM JAMES RODERICK which Petitioner shall hereafter be known.

ORDERED ON May 26, 2016.

Frederick P. Mercurio
FREDERICK P. MERCURIO, CIRCUIT JUDGE

COPIES TO:
Petitioner



"STATE OF FLORIDA, COUNTY OF SARASOTA
I hereby certify that the foregoing is a true and correct copy
of pages 1 through 1 of the instrument filed in
this office. The original instrument filed contains 1
pages.

☒ This copy has no redactions. ☐ This copy has been
redacted pursuant to law.
Witness my hand and official seal this 26 day of May, 2016.

KAREN E. RUSHING, CLERK OF THE CIRCUIT COURT
By: *[Signature]*