

L15 000 186 F24

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400300692784

06/26/17--01037--024 \*\*25.00

FILED  
JUN 26 AM 7:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 29 2017

J SHIVERS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** FORWARD COUNSELING ASSOCIATES, 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:

Neil Greenbaum, Esq.  
Name of Person  
Greenbaum Law Firm, P.A.  
Firm/Company  
20 South Swinton Avenue  
Address  
Delray Beach, Florida 33444  
City/State and Zip Code  
neil@neilgreenbaumlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Neil Greenbaum, Esq. 561 463-2133  
Name of Person at 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

**TO  
ARTICLES OF ORGANIZATION  
OF**

FORWARD COUNSELING ASSOCIATES, 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 November 3, 2015 and assigned  
Florida document number L15000186826

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)

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:

5109 S. La Sedona Circle

Enter Florida street address

Delray Beach

Florida

33483

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

FILED  
17 JUN 26 AM 7:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

or removed from our records:

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Ahmad Bryant	6292 Breckenridge Circle	<input type="checkbox"/> Add
		Lake Worth, Florida 33467	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Anthony Kling	5109 S. La Sedona Circle	<input type="checkbox"/> Add
		Delray Beach, Florida 33483	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Singular Services, LLC	5109 S. La Sedona Circle	<input checked="" type="checkbox"/> Add
		Delray Beach, Florida 33483	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Forward Recovery, LLC	2934 SW 22nd Circle	<input checked="" type="checkbox"/> Add
		Unit D	<input type="checkbox"/> Remove
		Delray Beach, Florida 33445	<input type="checkbox"/> Change
AMBR	Medicus Health Plan, Inc.	21055 Yacht Club Drive	<input checked="" type="checkbox"/> Add
		Suite 1801	<input type="checkbox"/> Remove
		Aventura, Florida 33180	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 JUN 26 AM 7:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA