Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BRENNAN, MANNA & DIAMOND, P.

Account Number: I20040000104

Phone

: (904)366~1500

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE STRENGTHS INITIATIVE LLC

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Corporate Filing Menu

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COVER LETTER

ŢO	Registration Se Division of Cor	ction porations		
GIT		ngths initiative LLC		t
อบ	BJECT:	Name of Limi	ted Liability Company	
		Amendment and fee(s) are sub-		:
		Darren C. Jones, Esq.		
	•		Name of Person	· · · · · · · · · · · · · · · · · · ·
	•	Brennan, Manna & Diamo	nd, P.L.	
	•			
		800 West Monroe Street		
			Address	
		Jacksonville, Florida 3220	2	
City/State and Zip Code				
		E-mail address: (to be used for future amoual report notifi	cation)
For	further information of	oncerning this matter, please o	alt:	
Da	uren Jones		904 366-1500	
	Name o	f Person	Name of Person ond, P.L. Firm/Company Address City/State and Zip Code (to be used for future annual report notification) all:	
Ene	closed is a check for t	ne following amount:		
	\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status		

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**

2016 JAN 26 AM 11.41

ALLANGESEL PORTO H16400020885 3

THE STRENGTHS INTTIATIVE LLC

(A Florida Limited	nny as it now appears on our records Liability Company)	7)
he Articles of Organization for this Limited Liability Company lorida document number <u>L15000198199</u>	were filed on November 24, 201	5 and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	pility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation 'L.L.C."
nter new principal offices address, if applicable:	804 Third Street North	
Principal office address MUST BE A STREET ADDRESS)	Suites A-B	
	Neptune Beach, Florida 32266	
nter new mailing address, if applicable:	****	
Mailing address MAY BE A POST OFFICE BOX)		
Mailing oddress MAY BE A POST OFFICE BOX) i. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her		, enter the name of th
. If amending the registered agent and/or registered o		, enter the name of th
. If amending the registered agent and/or registered o egistered agent and/or the new registered office address her		
i. If amending the registered agent and/or registered o egistered agent and/or the new registered office address her Name of New Registered Agent:	Enter Florida street address	

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

p± 4

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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>	Name	Address	Type of Action
MGR	Dax Weaver	P.O. Box 331003	■ Add
		Atlantic Beach, Florida 32233	□ Remove
			☐ Change
			□ Add
:			☐ Remove
· .			Chattee
			D'Add
			□ Add 28 □ Remove
			Remove
			Change
			Add
			Remove
			□ Change
			□ Add
;·			□ Remove
			□ Change

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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If an eff <u>Note:</u>	tve date, if other than the date of filing:	0207 (3)(b) d as the
ie rec The	ford specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlieg 90th day after the record is filed.	r of:
Dated .	January 25, 2016.	
	Signature of a member or authorized representative of a member	
	and the state of a distribution of annihit men tell calculation at a tricumen	
	Darren C. Jones, Authorized Representative	

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Filing Fee: \$25.00