## 16000008254

(Re	equestor's Name)	
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## **COVER LETTER**

ision or Corp	oot attotts		
Cabral Coa	ching Services, LLC		
Name of Limited Liability Company			
l Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
	Tony L Cabral		
		Name of Person	
	Cabral Coaching Service	es, LLC	
		Firm/Company	
	208 Bedford Street		
		Address	
	Oldsmar, FL 34677		
	tonv@tonvcabral.com	City/State and Zip Code	
	· ·	to be used for future annual report notifi	cation)
nformation co	oncerning this matter, please ca	all:	
bral		727 408-1353	
Name of	Person	Area Code Daytime	Telephone Number
a check for th	e following amount:		
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)
	Articles of Anial corresponding all corresponding to the Articles of Anial Corresponding to the	Articles of Amendment and fee(s) are substantial correspondence concerning this matter  Tony L Cabral  Cabral Coaching Service  208 Bedford Street  Oldsmar, FL 34677  tony@tonycabral.com  E-mail address: (information concerning this matter, please cabral  Name of Person  a check for the following amount:  Filing Fee \$30.00 Filing Fee &	Name of Limited Liability Company  If Articles of Amendment and fee(s) are submitted for filing.  If all correspondence concerning this matter to the following:    Tony L Cabral

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

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

Cabral Coaching Services, LLC				
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited L. Florida document number L16000008254	iability Company	were filed on January 12, 2016,	and assigned	t
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company here:		
Cabral Consulting Services, LLC				
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:		208 Bedford Street, Oldsmar, FL 3467	77	
Principal office address MUST BE A STREE	ET ADDRESS)	-	<del> </del>	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		208 Bedford Street, Oldsmar, FL 346	77	
B. If amending the registered agent and registered agent and/or the new registered of				he new
Name of New Registered Agent:	Tony L. Cabra	l	JAN JAN	
New Registered Office Address:	208 Bedford S	Street	<b>69</b> 5	
	014	Enter Florida street address	70 X	<u>ਤਿਵਾ</u> ਂ ਵਿਧਾ
	Oldsmar	City , Florida 346	Zip Cod S	: <u>\$</u>
		Сиў	THE COURT OF	

## 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Teresa M. Cabral	208 Bedford Street	
		Oldsmar, FL 34677	= Remove
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			D SERVE OF S
			PH Change

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessor	ary.)	
,			
		<del></del>	
(If an Not doct	cetive date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after file  E: If the date inserted in this block does not meet the applicable statutory filing requirements, this date ument's effective date on the Department of State's records.  record specifies a delayed effective date, but not an effective time, at 12:01 a.m. the 90th day after the record is filed.	ing.) Pursuant to 605. ate will not be liste	ed as the
Date	ed		
			2
	Signature of a member or authorized representative of a member	80 JA	SECR
	Tony L. Cabral  Typed or printed name of signee	JAN 18	ETARIE FORRIE
	r yped or printed name or signee		
	Page 3 of 3	РМ 년: 00	SIAIE
	Filing Fee: \$25.00	<b>=</b>	100 HZ 100 HZ

Filing Fee: \$25.00