

L16000061545

Florida Department of State
Division of Corporations
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From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
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8/18/2016 11:57:41 AM PAGE 1/001 Fax Server



August 18, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DMHHC COUNSELING, LLC
525 TAMiami TRAIL, UNIT #5
PORT CHARLOTTE, FL 33953

SUBJECT: DMHHC COUNSELING, LLC
REF: L16000061545

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please disregard previous letter. Are you adding, removing or changing the MGR information. Please state action.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: E16000203754
Letter Number: 016A00017512

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

DMFHC COUNSELING, 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 03/28/2016 and assigned Florida document number L16000061545

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:

Enter 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, Signatures of New Registered Agent:

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TALLAHASSEE, FLORIDA

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	Jennifer Wilkete	525 TAMiami TRAIL, UNIT #5	<input checked="" type="checkbox"/> Add
		PORT CHARLOTTE, FL 33953	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Renay Bloom	525 TAMiami TRAIL, UNIT #5	<input checked="" type="checkbox"/> Add
		PORT CHARLOTTE, FL 33953	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

E. Effective date, if other than the date of filing: _____ (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 8/17/16

Jennifer Willette
 Signature of a member or authorized representative of a member

 Jennifer Willette
 Typed or printed name of signer

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
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