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TALLAHASSEE FI COM

HARRIE J. HARRIE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Renee Darden Counselling and Coaching, LCC 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:
Renee Darden Name of Person
Renee Dorden Counselling and Coaching, LLC
741 NW 135 Way Address
Plantation, FL 33325 City/State and Zip Code
Jaylean 2002 Syahow. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Renee Daviden at (954) 245-6148 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\text{Certificate of Status}\$\$ Certificate of Status \$\text{Certified Copy}\$\$ (additional copy is enclosed) \$\text{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

Rence Darden Canselline (Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v	were filed on /o///20/6 and assigned
Florida document number <u>L 16000 188 237</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
Danden Behavioral Counsell The new name must be distinguishable and contain the words "Limited Liability	ry Corpany," the designation "LLC" or the abbreviation "L.L.C."
	TALE
Enter new principal offices address, if applicable:	- Company
(Principal office address MUST BE A STREET ADDRESS)	
	S 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	STATE STATE
	A" -
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
registered agent and/or the new registered office address here.	•
N	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin 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 **Type of Action** <u>Title</u> Name **Address** Alkeem Darden 74/ NW 135 Way, Plantation DAdd ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove □ Add ☐ Remové

☐ Change

ctive date, if other than the date of filing: (option	nal)
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after five. If the date inserted in this block does not meet the applicable statutory filing requirements, this coment's effective date on the Department of State's records.	date will not be listed as
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.	m. on the earlier o
e 90th day after the record is filed.	
	7A 28
d 5/11/20/7, Signature of a member or authorized representative of a member	
	至
Conce I dedu	SS - 6
Signature of a member or authorized representative of a member Renee Darden Typed or printed name of signee	E P
Rence Dielan	PH 2:

Page 3 of 3

Filing Fee: \$25.00