## L16000214932

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
(***	<b>,</b> ,	- ·· <b>,</b>
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Na	me)
·	•	•
(Do	cument Number)	
(20		,
		4.00
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
		ļ
1		





000293299500

000293239500 12/19/16--01046--003 \*\*25.00

ECRETARY OF STATE

S Warren

DEC 2 1 2016

## **COVER LETTER**

	וַעַעוע	sion of Corp	Drations			
SUF	JECT:	POSITIVE R	ECOVERY RESOURCES LL	.c		
502	oben.		Name of Limit	ed Liability Company		
The	enclosed	Articles of A	mendment and fee(s) are subm	nitted for filing.		
Plea	se return	all correspond	dence concerning this matter to	the following:		
			JONATHAN BELOLO			
				Name of Person		_
			POSITIVE RECOVERY RI	ESOURCES LLC		
				Firm/Company		_
			2508 N AUSTRALIAN AV	Е		
				Address		_
			WEST PALM BEACH, FL	33407	-	
				City/State and Zip Code		_
			jb@sunshinerecoverycenter.c			
			E-mail address: (to	be used for future annual re	port notification)	
For	further in	formation cor	ncerning this matter, please cal	11:		
Jona	athan BEI	LOLO		561 7899		
		Name of I	Person	Area Code	Daytime Telephone Number	er e
Enc	losed is a	check for the	following amount:			
<b>=</b>	\$25.00 Fi	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certific Certifie	ate of Status &

MAILING ADDRESS:

TO:

**Registration Section** 

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

POSITIVE RECOVERY RESOUR	CES LLC			
(Name of the Limit	ted Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited L Florida document number L16000214932	iability Company	were filed on 11/28/2016 and assigned		
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity 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)		2508 N AUSTRALIAN AVE WEST PALM BEACH		
Enter new mailing address, if applicable:		2508 N AUSTRALIAN AVE		
(Mailing address MAY BE A POST OFFICE BOX)		WEST PALM BEACH		
		FLORIDA 33407		
B. If amending the registered agent and/registered agent and/or the new registered of  Name of New Registered Agent:	or registered of or registered of or registered of or registered or regi	AR 2 m		
New Registered Office Address:	2508 N AUSTI	CALIAN AVE		
		Enter Florida street address		

## 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.

City

WEST PALM BEACH

Changing Registered Agent, Signature of New Registered Agent

; Florida <u>33407</u>

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>	Address	Type of Action
MGR	BELOLO, BESALEL	524 DATURA ST, STE 215	
		WEST PALM BEACH, FL 33401	■ Remove
			☐ Change
MGR	BELOLO, JONATHAN	2508 N AUSTRALIAN AVE	
		WEST PALM BEACH, FL 33407	Remove
AMBR	SUNSHINE RECOVERY CENTER LLC	2508 N AUSTRALIAN AVE	<b>⊟</b> Add
		WEST PALM BEACH, FL 33407	□ Remove
			☐ Change
			Add
			Remove
			Change
			Add
			□ Remove
			☐ Change
			Remove
			Change

					<del>.</del>
<del></del>					
				····	
		·			
	<del></del>		<u> </u>		
			<u> </u>	···-	
-					****
	······				
		<u>.                                    </u>			<u> </u>
ctive date, if other tha	n the date of filing	g:		(optiona	ıl)
ce at the title to the	his block does not m	neet the applicable	te of filing or more tha statutory filing requ	n 90 days after fili irements, this da	ng.) Pursuant to 6 te will not be li
: If the date inserted in t	the Department of S	tate's records.			
: If the date inserted in t					on the car
If the date inserted in t ment's effective date on	ayed effective d	ate, but not an	effective time,	at 12:01 a.m	i. On the ear
If the date inserted in to ment's effective date on ecord specifies a de		late, but not an	effective time,	at 12:01 a.m	i. On the ear
If the date inserted in to ment's effective date on ecord specifies a de e 90th day after the		late, but not an	effective time,	at 12:01 a.n	i. On the ear
If the date inserted in to ment's effective date on ecord specifies a de- te 90th day after the			effective time,	at 12:01 a.m	i. Oil tile ear
If the date inserted in to ment's effective date on ecord specifies a de e 90th day after the	e record is filed.	, <u>2016</u> . Stree	helolo	27.13	
If the date inserted in to ment's effective date on econd specifies a detective date on econd specifies and et al., and the day after the day after the electric days.	Signature of a r		helolo	ember ASST	
e: If the date inserted in to iment's effective date on ecord specifies a de ne 90th day after the	Signature of a r	, <u>2016</u> . Stree	Lololo Depresentative of a m	27.13	

Filing Fee: \$25.00

٦.