# 47cc173715

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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13/11/24

# **COVER LETTER**

TO: Registration Division of C	Section Corporations		
HARPC	OUNSELING LLC		
SUBJECT:	Name of Li	mited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
	pondence concerning this matte		
	Julia Dawoud		
		Name of Person	<del></del>
	HARP COUNSELING L	LC	
		Firm/Company	
	19165 Pease Place		
		Address	
	Lutz, FL 33558		
	-	City/State and Zip Code	
	julia@tampachristiancoun	seling.com (to be used for future annual report no	office in a
For further information	concerning this matter, please of	•	ancadon)
	concerning this matter, prease c		
Julia Dawoud	60	at ()	
Name	of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration	Section	<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Cor	rporations

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HARP COUNSELING LLC	ited Liability Compa	any as it now appears on	our records.)	
<u> </u>	(A Florida Limited	ny as it now appears on Liability Company)	<u>,</u>	
The Articles of Organization for this Limited I.	iability Company	were filed on 08/15/2	2017 and assigned	
Florida document number L17000173745	·			
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:		
TAMPA CHRISTIAN COUNSELING, LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desig	nation "LLC" or the abbreviation "L.L.C."	
Enternous principal offices address if applicables		19165 PEASE PLACELUTZ, FL 33558		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			}	
			·	
Enter new mailing address, if applicable:		19165 PEASE PLAG	CELUTZ, FL 33558	
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>		
			73. 2	
		<del></del>	- m w	
B. If amending the registered agent and/or ragent and/or the new registered office address	registered office a ss here: DAWOUD, JUI		ds, enter the name of the new regi	
Name of New Registered Agent:			-	
New Registered Office Address:	19165 PEASE F	LACE  Enter Florida st	treat address	
	LUTZ	Lines I tortua 31	Florida <sup>33558</sup>	

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	DAWOUD, JULIA	19165 PEASE PLACELUTZ, FL 33558	
			□Remove
			□ Change
			□ Add
			□ Remove
		, 	Change
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		<del></del>	
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Note: If the	te, if other than the date of filing:	5,020 ted as
he record s The 90th	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlied and after the record is filed.	er oi
08/05/ Dated	2024	
Dated		

Page 3 of 3

### To Whom It May Concern:

My name is Julia Dawoud, and I am the owner of Tampa Christian Counseling, LLC- the document number is L24000327014. The business was voluntarily dissolved, and I am releasing the name to be used by Harp Counseling, LLC- the document number is L17000173745.

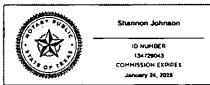
Kind Regards,

Julia Dawoud

Notary Signature: Date: 08/29/2024

Notary name: Shannon Johnson

State of Texas County of Tarrant



This instrument was acknowledged before me by means of an interactive two-way audio and video communication on 08/29/2024 by Julia Dawoud.

Electronically signed and notarized online using the Proof platform.