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6/12/2018



Division of Corporations

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COASTAL COUNSELING AND WELLNESS CENTER LLC

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Help

TO:

#### **COVER LETTER**

	gistration Sec vision of Corp			
		COUNSELING AND WEI	LNESS CENTER LLC	
SUBJECT:		Name of Limit	cd Liability Company	
The enclose	d Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please retur	n all correspon	dence concerning this matter t	n the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	<del></del>
		101 N. Brand Blvd., 11th	i Floor	
			Address	
		Glendale, CA 91203		
		•••	City/State and Zip Code	
		coastaleounselingandwell	ness@gmail.com  o be used for future annual report notific	ation)
For further	information co	ncerning this matter, please ca		
Cheyenne	Moseley		800 773-0888 ext	t. 9724 Telephone Number
-	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
□ \$25.00	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)

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 ARTICLES OF ORGANIZATION OF

COASTAL COUNSELING AND WELLNESS O		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.18000132438	were filed on 05/29/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Coastal Wellness and Life Coaching Center LLC		7, "b.
The new name must be distinguishable and end with the words "Limited Liab	pility Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3270 Suntree Blvd Suite 1121	
(Principal office address MUST BE A STREET ADDRESS)	Melbourne, FL 32940	r. t
Enter new mailing address, if applicable:	3270 Suntree Blvd Suite 1121	
(Mailing address MAY BE A POST OFFICE BOX)	Melbourne, FL 32940	هو فو
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records, <u>en</u>	er the name of the r
Name of New Registered Agent:		
New Registered Office Address:	Fotor Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
— I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	ree to act in this capacity. I further performance of my dutics, and I o	agree to comply with im familiar with and

H'Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			D ∧dd
			□ Remove
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Filing Fee: \$25.00