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| e (10 1126°P. | | IOR SERVICES LLC | |
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| SUBJECT: | | ited Liability Company | |
| The enclosed Articles | of Amendment and fee(s) are sub | mitted for filing. | |
| Please return all corre | spondence concerning this matter | to the following: | |
| | | ORALYS PENA | |
| | | Name of Person | |
| | PENA | BEHAVIOR SERVICES LLC | |
| | | Firm/Company | |
| | | 19481 NW 60 CT. | |
| | | Address | |
| | | HIALEAH: / FL 33015 | |
| | | City/State and Zip Code | |
| | | YS_PENA@YAHOO.COM | |
| | E-mail address: (| to be used for future annual report noti- | fication) |
| For further informatio | n concerning this matter, please co | all: | |
| ORA | LYS PENA | 786 426 068 | 2 |
| Nam | e of Person | at () Area Code Daytim | e Telephone Number |
| Enclosed is a check to | r the following amount: | | |
| S25.00 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 tadditional copy is enclosed) |

MAHLING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section
Division of Corporations

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

| PENA BEHAVIOR SERVIC | CES LLC | | |
|--|------------------------------|------------------------|--------------------|
| (<u>Name of the Limited Liability Company as it n</u> (A Florida Limited Liability C | ow appears on or lompany) | ar records.) | |
| The Articles of Organization for this Limited Liability Company were file | ed on | MAY 30, 2018 | und assigned |
| Florida document numberL18000134654 | | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, <u>enter the new name of the limited liability con</u> | npany here: | | |
| The new name must be distinguishable and contain the words "Limited Liability Compa | any," the designat | ion "I.L.C" or the abb | reviation "L.L.C." |
| Enter new principal offices address, if applicable: | | | |
| Principal office address MUST BE A STREET ADDRESS) | <u> </u> | | |
| | | | |
| | | | |
| Enter new mailing address, if applicable: | | | 3 300 |
| Mailing address MAY BE A POST OFFICE BOX) | | | - 25 |
| Maining under SS PLAT DE AT OST OFFICE DOAL | | | 0.7 |
| B. If amending the registered agent and/or registered office adergistered agent and/or the new registered office address here: | dress on our | records, enter t | ••• |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Florida stre | ret address | |
| | | , Florida | |
| Ġψ | | | 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, 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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| <u>ote:</u> If the d | e, if other than the date ate is listed, the date must be sp late inserted in this block d ffective date on the Departi | oes not meet the applicable | ate of filing or more than 90 days statutory filing requirements | optional) after filing.) Pursuant to 605,0207 (, this date will not be listed as t |
| record s The 90th | pecifies a delayed effo day after the record i | ective date, but not ar s filed. | n effective time, at 12: | 01 a.m. on the earlier of: |
| ited | JUNE 11 | 2018 | | |
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| _ | Signs | dure of a member or authorize | d representative of a member | _ |
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Page 3 of 3

Filing Fee: \$25.00