118000248124

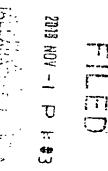
(Req	juestor's Name)	
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COVER LETTER

TO: Registration Section of Corp.	
SURJECT: Lawhon B	ehavior Services LLC
	Name of Limited Liability Company
	mendment and fee(s) are submitted for filing. dence concerning this matter to the following:
	Christopher King
	Name of Person
	Lawhon Behavior Services LLC
	Firm/Company
	681 THURINGER ST NW
	Address
	Palm Bay FL 32907
	City/State and Zip Code
	mogy2000@gmail.com
	E-mail address: (to be used for future annual report notification)
For further information con	ncerning this matter, please call:
Christopher King	Person Area Code Daytime Telephone Number
Name of I	Person Area Code Daytime Telephone Number
Enclosed is a check for the	following amount:
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

Lawhon Behavior Services I		
(Name of the Limite)	d Liability Compa A Florida Limited	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Lia Florida document number L18000248124	ibility Company	were filed onand assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liab	ility company here:
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		3030 N. Rocky Point Dr.
(Principal office address MUST BE A STREET ADDRESS)		STE 150A
		Tampa FL 33607
Enter new mailing address, if applicable:		3030 N. Rocky Point Dr.
(Mailing address MAY BE A POST OFFICE BOX)		STE 150A
		Tampa FL 33607
B. If amending the registered agent and/oregistered agent and/or the new registered off Name of New Registered Agent:	ice address her	ffice address on our records, enter the name of the new c: t Registered Agent, LLC.
New Registered Office Address:	Rocky Point Dr. STE 150A Enter Florida street address	
	Tamna	33607

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
MGR	Christopher King	681 Thuringer St. NW	🗹 Add
		Palm Bay, FL 32407	Remove
		-44	Change
AMBR Jaclynn Lawhon	Jaclynn Lawhon	681 Thuringer St. NW	🗹 Add
	Palm Bay, FL 32907	□ Remove	
		-	☐ Change
		□ Remove	
		Change	
		-,,,,	Remove
			Change
		O Add	
			□ Remove
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			□ Change

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(If an effective Note: 1	re date, if other than the date of filing: tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	10/29/2018 October 29th 2018
	Chair Signature of a member or authorized representative of a member Christopher Kiny Typed or printed name of signee
	Christopher Kiny
	./ Typed or printed name of signee

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Filing Fee: \$25.00