4800265237

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D. SCOTT DEC 2 0 2019

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Serenty Wellness Soberliving LC. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nicole Cherie Bryan
Secenity Wellness Suber Living LC
4440 NE 30+h AUS
Light house Pt Fl 33064
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (541) SO1-9911 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & Certified Copy (Certified Copy tadditional 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

(711 107)64 (711)754	
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000265 237</u>	were filed on November 13, 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:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4440 NE 30th AVENUE
(Principal office address MUST BE A STREET ADDRESS)	Lighthouse Point FC 33064
Enter new mailing address, if applicable:	~3
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of	
registered agent and/or the new registered office address her	<u>e</u> :
Name of New Registered Agent:	icae chérie Bryan
New Registered Office Address: 44	40 NE 30+h AUS Emer Florida street address
	O' - 1

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

Page 1 of 3

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 = M $AMBR = A$	anager uthorized Member		
· <u>Title</u>	<u>Name</u>	Address	Type of Action
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High house Point # 330ky Eight house Point # 330ky ffective date, if other than the date of filing:	· · · · · · · · · · · · · · · · · · ·
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record specifies a delayed effective date, but not an effective time, at 12:01 a.m. o he 90th day after the record is filed.	n the earlier
ed December 5, 2018 Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00