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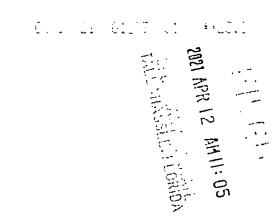
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Coastal Behavioral Services, LLC 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:
Crystal Lagor Nume offerior
Coastal Behavioral Services, LLC
10135 Montague Street
Tampa, FL 33626 Chy/State and Zip Code
Crystalinc11@gmail.com E-mail address: (to be used for future annual report hot (fication)
For further information concerning this matter, please call:
Crystal Lagor at (813) 401-2539 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
\$ \$25.00 Filing Fee \$ \$30.00 Filing Fee & Certificate of Status \$ Certified Copy (additional copy is enclosed) \$ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on	0/0/2001	and assigned
Florida document number <u>L190000277</u> 60		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company h	ere:	
The new name must be distinguishable and contain the words "Limited Liability Company," the	lesignation "LLC" or the abbrevio	ium T.L.C"
Enter new principal offices address, if applicable:		7
(Principal office address MUST BE A STREET ADDRESS)	L. L.	<i>≂</i>
	<i>∴</i> \-1	2 '
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	<u>.</u>
B. If amending the registered agent and/or registered office address on our (agent and/or the new registered office address here:	records, <u>enter the name of</u>	the new regi
agent and/of the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
Enter Flo	rida street address	

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.

Circ

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>	Name	Address	Type of Action
MGK	Bichard Wixon	1482 Premier Village Way, Clearwater, FL 33764	XAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			_ ⋛ ∃∧dd
			Add PRemove 20 12
		2 (Section 1997)	Change
			⊡Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

There will be a change to two or	
I	vher
for this LLC now. The owners wil	1 he
	`
Crystal Lagor (remaining the same)
and Richard Wixon (adding).	
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Effective date, if other than the date of filing: 4/8/202 (optional) If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursua. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	nt to 605.0207 (t be listed as t
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th ord is filed.	day after the
Dated	
Signature of a shember or authorized representative of a member	
Crystal Lagor MGR/OWNER Typed or printed name of signee	
Typed or printed name of signee	