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	ration Sect on of Corp		•	•	٠		
Dy	Dynamic Psychometrics LLC						
Name of Limited Liability Company							
The enclosed A	rticles of A	mendment and fee(s) are sub-	mitted for filing.				
		dence concerning this matter					
		Maria Emil Jimenez Santiago					
			Name of Person	•			
		Dynamic Psychometrics Ll	LC				
	Firm/Company						
	13361 N 56th Street, Office B						
			Address				
		Tampa, FL 33617					
			City/State and Zip Code				
		mj.psych@outlook.com	to be used for future annual r				
For further info	mation cor	neerning this matter, please ca		eport notification;			
Maria Emil Jimenez Santiago			813 503	-3652			
	Name of I	Person	Area Code	Daytime Telepho	one Number		
Enclosed is a ch	eck for the	following amount:					
□ \$2 5.00 Filin	ng Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	g Address:		Street Ad Registra				
Registration Section Division of Corporations			Registration Section Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dynamic Psychometries LLC					
(Name of the Limi	ted Liability Compa (A Florida Limited	nny as it now appears on our reco Liability Company)	rds.)		
The Articles of Organization for this Limited L	iability Company	were filed on February 06, 20	and assigned		
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	oility company here:			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LI	.C" or the abbreviation "L.L.C."		
Enter new principal offices address, if applic	cable:	13361 N 56th St			
Principal office address MUST BE A STREE		Tampa FL 33615			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office addre	registered office	13361 N 56th St Office B Tampa FL 33615 address on our records, ento	The name of the new register of the name of the new register of the new register of the new register of the name o		
Name of New Registered Agent:					
New Registered Office Address:	13361 N 56th S				
		Enter Florida street address			
	Tampa		Florida 33617 Zip Code		
		City	гір Соде		

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
AR	MARIA EMIL JIMENEZ SANTIA	7511 W HANNA AVE TAMPA FL33615	🗆 Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			
			AS Change
			□Remove
	<u>.</u>	· · · · · · · · · · · · · · · · · · ·	□Change
			□Add
			□Remove
			□Change

Typed or printed name of signee

Maria Emil Jimenez Santiago

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