## 119000073471

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2022 APR -6 AM 6: 18
SECRETARY OF STATE
TALLAHACCE

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## **COVER LETTER**

TO: Registratio Division of	n Section Corporations		
	Yoga,Life, LLC		
SUBJECT:	Name of Li	mited Liability Company	
The enclosed Article	es of Amendment and fee(s) are su	ibmitted for filing.	
	respondence concerning this matte		
	Tameeka Leon		
		Nume of Person	
	The Goal Success Coach		
	<del></del>	Firm/Company	
	4916 E Michigan St, Apt	. 14	
		Address	<u> </u>
	Orlando, FL 32812		
		City/State and Zip Code	
	tameeka@goalsuccesscoa		
Com Court on in Commen	E-mail address: ion concerning this matter, please	(to be used for future annual report no	otification)
	ion concerning this matter, prease		
Tameeka Leon		407 749-8193 at ()	. <u></u>
Na	me of Person	Area Code Dayti	ime Telephone Number
Enclosed is a check	for the following amount:		
■ \$25.00 Filing Fo	ee S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Ad</u> Registrati	Idress: ion Section	<u>Street Address:</u> Registration S	Section
Division of Corporations		Division of C	orporations
P.O. Box Tallahass	6327 ee, FL 32314	The Centre of 2415 N. Mon	Tallahassee roe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2022 APR -6 AH 6: 18

Coffee Yoga, Life, LLC

SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on our records EE, FL (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	y were filed on March 15, 2019	and assigned	
Florida document number [.19000073471]			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company here:		
The Goal Success Coach LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC	C" or the abbreviation "L.IC."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		_ <del></del>	
Enter new mailing address, if applicable:		<del>-</del> _	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter	<u>the name of the new registers</u>	
agent armor the second			
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street addre	288	
	, F)	lorida Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>2</u>	•	
I hereby accept the appointment as registered agent and ag	_	orther agree to comply with the	
Thereby accept the appointment as registered agent and ag			

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
		<del></del>	
			□Remove
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<u>lote:</u> If	date, if other than the date of ve date is listed, the date must be speci the date inserted in this block does is effective date on the Departmen	not meet the applica	o date of filing or more t ble statutory filing red	(optional) han 90 days after filing.) I quirements, this date w	Pursuant to 605.0207 ( ill not be listed as t
record s Lis tiled	pecifies a delayed effective date, b	ut not an effective tir	ne, at 12:01 a.m. on th	ne earlier of: (b) The	90th day after the
ated	And Room				
			rized representative of a	mambar	
	Signature	e of a member or autho	rized representative or a	themoer	