2/15/23, 7:59 AM Division of Corporations

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> > (((H230000596013)))



H230000596013ABC-

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500 Fax Number : (702)900-2290

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: documents@incorp.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LOVING GUIDANCE, LLC

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COVER LETTER

TO: Registration Se Division of Cor		•	
SUBJECT: LOVING O	GUIDANCE LLC		
SUBJECT: ESTERO		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
	ondence concerning this matter	•	
•	C		
	Wendy Hefley		
		Name of Person	
	InCorp Services, Inc.		
		Firm/Company	
	3773 Howard Hughes Park	way Suite 500S	
		Address	
	Las Vegas, NV 89169-601-	1	
	**************************************	City/State and Zip Code	······
	managedreports@incorp.co E-mail address: (i	n o be used for future annual report notific	ation)
For further information c	oncerning this matter, please ca	il:	
Wendy Hefley for InCor	n Services Inc	at (702) 866-2500 ext. 6	6904
	f Person		elephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		<u>Street Address:</u> Registration Secti	ion.

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

7/05/1996 and assigned
7/05/1996 and assigned
;
gnation "LLC" or the abbreviation "L.L.C."
our records, enter the name of the
S F
Street address
sireei address - I
Florida - co
Zip Code

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
AMBR	Mark Rothschild	820 W Broadway	
		Oviedo, FL 32765	■ Remove
			☐ Change
AMBR	Anthony P Danielak	820 W Broadway	
		Oviedo, FL 32765	■ Remove
			Change
AMBR	Stephen V King	820 W Broadway	
		Oviedo, FL 32765	■ Remove
			□ Change
AMBR	John Hults	820 W Broadway	
		Oviedo, FL 32765	■ Remove
			□ Change
AMBR	Conscious Discipline Holdings, LLC	820 W Broadway	≘ Add
		Oviedo, FL 32765	Remove
			Change
			☐ Remove
		.	□ Change

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Note: If the	ie date inserted in this block d s effective date on the Departi	loes not meet the applica			
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ne record	specifies a delayed eff	ective date, but not	an effective time	. at 12:01 a.m. on the	e earlier of:
	th day after the record			,	
	(7-1	2022			
Dated	February 1	. 2023			
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Page 3 of 3

Filing Fee: \$25.00