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COVER LETTER

TO: Registration Servision of Con			
	vioral Center, LLC	•	
SUBJECT:	·	·	_
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Roxana Branigan		
	 	Name of Person	
		Firm/Company	
	776 Saint Albans Drive		
		Address	· · · · · · · · · · · · · · · · · · ·
	Boca Raton, FL33486		
	rboglio@mac.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report not	ification)
For further information of	concerning this matter, please ca	all:	
Roxana Branigan		310 220-3122	
Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & 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

The Benavioral Center, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records liability Company)	.)
ne Articles of Organization for this Limited Liability Company orida document number	were filed on	and assigned
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	ility company here:	
Counselogy, LLC		
te new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	7100 West Camino Real, Suite	4()4
rincipal office address MUST BE A STREET ADDRESS)	Boca Raton, FL 33433	
nter new mailing address, if applicable: <u>Aailing address MAY BE A POST OFFICE BOX</u>)	776 Saint Albans Drive Boca Raton, FL 33486	2020 SEC
If amending the registered agent and/or registered office a ent and/or the new registered office address here:	ddress on our records, <u>enter t</u>	the name of the new regist
Name of New Registered Agent:		1 2: 28
New Registered Office Address:	Enter Florida street address	·
<u></u>	, Flo	rida
	City	Zip Code

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 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>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Remove
		/	Change
		/	
	. /	/	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
	./		Remove
			□Change
		 	□Add
			□Remove

	
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If an effective date is I Note: If the date is	other than the date of filing:
e record specifies a rd is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated <u> </u>	15 2020.
	(Dorona
	Signature of a member or authorized representative of a member
	Roxana Branigan

ETT. E. GARAG