## L19000251659

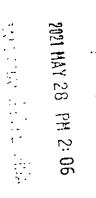
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

то:	Registration S Division of Co			
SUBJEC		nski Hypnotherapy LLC		
SOBJEC	-1. <u> </u>	Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		ANN MARIE BALKANS	KI	
			Name of Person	
			Firm/Company	
		1600 E SUNRISE BLVD	APT 3601	
		<del></del>	Address	
		FORT LAUDERDALE, F	L 33304	
		BALK ANSWINDOGALA	City/State and Zip Code	
		BALKANSKIMD@GMAI	to be used for future annual report no	otification)
For furth	er information o	concerning this matter, please c	·	
ANN M	ARIE BALKAN	NSKI	954 6787600 at ()	
	Name (	of Person		me Telephone Number
Enclosed	is a check for t	he following amount:		
≡ \$25.0	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 Addre		Street Address:	and an
	Registration Division of C		Registration S Division of Co	
	P.O. Box 632		The Centre of	

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANN BALKANSKI HYPNOTHERAPY LLC			
(Name of the Limited Liability Company as it now appears on our recor (A Florida Limited Liability Company)	<u>'ds.</u> )		
The Articles of Organization for this Limited Liability Company were filed on October 07, 2019	9	_ and assi	gned
Florida document number L19000251659.			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company here:	•	21	
Rapid Realization LLC  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC		2	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LL"	C" or the abbres	viation ž L.I	C."
Enter new principal offices address, if applicable:	} -	28	
• • • • • • • • • • • • • • • • • • • •		28 PH 2: 06	
Principal office address MUST BE A STREET ADDRESS)	· · ·		
		. 5	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
	_		
3. If amending the registered agent and/or registered office address on our records, enter	r the name o	f the new	regist
gent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
Enter Florida street addre.	SS		
, FI	lorida	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 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>	<u>Name</u>	Address	Type of Action
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			□Remove
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Effective date, if oth fan effective date is listed	ier than the date d, the date must be sp	of filing: ecitic and cannot b	e prior to date of	filing or more than	(option 190 days after fil	al) ine.) Pu	rsuant to 605 02
Note: If the date inser document's effective o	rted in this block do	oes not meet the	applicable stat	utory filing requ	rements, this d	ate wil	I not be listed
document s effective e	ante on the Departi	nent of State \$ 16	cords.				
record specifies a del d is filed.	layed effective date	, but not an effec	ctive time, at 11	2:01 a.m. on the	earlier of: (b)	The 90	Oth day after th
Dated		2021					
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		ture of a member o					

Filing Fee: \$25.00