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Email Address: <u>D'inQ.QVileS@taxCave inC.Com</u> LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COGNITIVE BEHAVIOR CHAMPIONS LLC		To:						
From: Account Name : TAX CARE INC Account Number : I202100000193 Phone : (407)774-0861 Fax Number : (407)774-5838 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: D'iOQ. QV i LSO TOXCOV L'IOC COM LLC AMIND/RESTATE/CORRECT OR M/MG RESIGN COGNITIVE BEHAVIOR CHAMPIONS LLC Certificate of Status 1 Certificate of Status 1 Certified Copy 0 Page Count 01 Estimated Charge \$30.00			Division of Co					
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Certified Copy 0 Page Count 01 Estimated Charge \$30.00	2: 3	annual report mailings. Enter only one email address please.** Email Address: <u>D'inQ.QVillS@ taxCarlinc.com</u>						
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(((H22000270)852 3)))	COVER LETTER	
TO: Registration Se Division of Corp			
	chavior Champions, LLC.		
SUBJECT:	Name of Limi	ted Liability Company	<u> </u>
The enclosed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	Solomon Richberg		
		Name of Person	
	Cognitive Behavior Champ	nions, LLC.	
		Firm/Company	
	855 Outer Road		
	· · · · · · · · · · · · · · · · · · ·	Address	
	Orlando, FL 32814		
		City/State and Zip Code	
	Solomon.nichberg@chorlan	do.com to be used for future annual report noti	ification)
For further information c	oncerning this matter, please ca		
Ninoschka L. Aviles	•	407 774-0861	
Name o	fPerson	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is coclosed)
<u>Mailing Addres</u> Registration Division of C P.O. Box 632 Tallahassee, I	Section corporations 7	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro Tallahassee, FI	rporations Fallahassee Street, Suite 810

(((H22000270852 3))) ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cognitive Behavior Champions, LLC. (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/08/2019 and assigned Florida document number L19000279259

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words 'Limited Liabi	iny company, the designation face of	I UIC AUDIEVIAUDIO - ELLEG.
Enter new principal offices address, if applicable:	855 Outer Road	
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32814	
Enter new mailing address, if applicable:	855 Outer Road	
(Mailing address MAY BE A POST OFFICE BOX)	Orlando, FL 32814	
munic unress mar bis a rost of a rest bing		20
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: <u>Name of New Registered Agent</u> : <u>New Registered Office Address</u> :	address on our records, <u>enter th</u>	e name of the new registered
New Registered Office Address.	Enter Florida street address	
	, Flori	ida
	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.

	from our records:	(((H22000270852 3)))	
MGR = M $AMBR = A$	anager uthorized Member		
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D. If amending any other information, enter change(s) bere: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: ________(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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If the record specifics a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

August 10th Dated	2022	
Sclorus	" hunter	
Sig	gnature of a member or authorized representative of a member	
Solomon Richberg		
	Typed or printed name of signee	