# L19000283924

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DATE:

1/8/20

NAME:

TAMPA PSYCHOEDUCATIONAL EVALUATIONS LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

#### **COVER LETTER**

#### Registration Section O: Division of Corporations

JBJECT:	Name of Lim	ited Liability Company	<del>-</del>
e enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
ease return all correspo	ondence concerning this matter	to the following:	
	Shama Stepp		
	<del></del>	Name of Person	
	ZenBusiness PBC		
	•	Firm/Company	
	702 San antonio St., 4th F	loor	
		Address	<del></del>
	Austin, TX 78701		
		City/State and Zip Code	-
	fulfillment@zenbusiness.co		
	E-mail address: (	to be used for future annual report notifi-	cation)
r further information c	oncerning this matter, please c	all:	
nama Stepp		844 4936249	
Name o	f Person	at () Area Code Daytime	Telephone Number
closed is a check for the	ne following amount:		
S25.00 Filing Fee	☐ \$30.00 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

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

Tampa Psychoeducational Evaluations LLC

(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)		
he Articles of Organization for this Limited Liability Company	and assigned		
lorida document number L19000283924			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liab	ility company here:	w <b>~</b>	
lorida psycho educational evaluations LLC		<b>620</b>	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."	
nter new principal offices address, if applicable:		TAR	
Principal office address MUST BE A STREET ADDRESS)			
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nter new mailing address, if applicable:		ाम 🤍	
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Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·		
. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	<u> </u>		
New Registered Office Address:			
The Hogister of The Harden	Enter Florida street address		
	. Florid		
	City	Zip Code	
ew Registered Agent's Signature, if changing Registered Agent:			
hereby accept the appointment as registered agent and agrovisions of all statutes relative to the proper and complete cept the obligations of my position as registered agent as paing filed to merely reflect a change in the registered office impany has been notified in writing of this change.	performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and . Or, if this document is	
If Char	nging Registered Agent, Signature of Ne	w Registered Agent	

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added r removed from our records:

AGR = Manager AMBR = Authorized Member

<u>`itle</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			□Change
			□Add
			□Remove
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ective date, if other than effective date is listed, the date te: If the date inserted in thi ument's effective date on the	s block does not	meet the applica	o date of filing of ble statutory f	or more than 90 d	_ (optiona ays after filir ents, this da	ig.) Pursua te will no	nt to 605. t be liste	,020 ed a
cord specifies a delayed effe s filed.	ctive date, but no	ot an effective tir	ne, at 12:01 a.	m. on the earlie	er of: (b)	The 90th o	day after	· the
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/s/ Stacy Zebrio	ck	a member or author	· · · · · · · · · · · · · · · · · · ·	-:				