Division of Corporations Electronic Filing Cover Sheet

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(((H20000043347 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : DBS DIEZ BUSINESS SERVICES INC

Account Number : I2017000086 : (813)871-1816 Phone : (813)884-5920 Fax Number

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MELISSA BEHAIVOR CONSULTING LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

HelpSULKER FEB 1 1 2020

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MELISSA BEHAIVOR CONSULTING LI				
(Name of the Limited Liab) (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)		_	
The Articles of Organization for this Limited Liability	Company were filed on 02/07/2020	an	d assign	ned
Florida document number L20000027178	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company here:			
MELISSA BEHAVIOR CONSULTING LLC				
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the	abbreviatio	n "L.L.C	. , ,
Enter new principal offices address, if applicable:				<del>-</del>
(Principal office address MUST BE A STREET ADD	DRESS)			<del></del>
Enter new mailing address, if applicable:		75.	2020	
(Mailing address MAY BE A POST OFFICE BOX)			111	777
[Mutting dutiress MAT BE A FOST OF FICE BOX]			=	
B. If amending the registered agent and/or reg	deterned office address on our wagerds entr	, w the ne	 martin	i i i
registered agent and/or the new registered office ad	ldress here:	. <u> (110 111</u>	<u> မှ</u>	THE HEW
	<del></del>	77	5	
Name of New Registered Agent:				
New Registered Office Address:				<del></del>
	Enter Florida street address			
	, Florida			
	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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			☐ Change
			□ Add
			Remove
		Change	
		□ Remove	
			Change
		□ Add	
		□ Remove	
			☐ Change
		□ ∧dd	
		□ Remove	
			Change
			Add
			□ Remove
			□ Change

). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an of) Note:	ive date, if other than the date of filing:  (optional)  ective 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)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the lent's effective date on the Department of State's records.
the reco	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	FEBRUARY 07 , 2020
	Signature of a member or authorized representative of a member  MELISSA BAEZ-TORRES
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00



February 7, 2020

## FLORIDA DEPARTMENT OF STATE Division of Corporations

DBS DIEZ BUSINESS SERVICES

SUBJECT: MELISSA BEHAIVOR CONSULTING LLC

REF: L20000027178

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form you submitted is for a Profit Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder Regulatory Specialist III FAX Aud. #: H20000043347 Letter Number: 720A00002803