L20000141372

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	

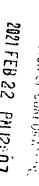
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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Diliana Polanco		
		Name of Person	
	Blue Dandelion Integrative	e Theray, LLC	
	·	Firm/Company	
	1082 Bainbury Ln		
		Address	
	West Melbourne, FL 3290	4	
		City/State and Zip Code	<u> </u>
	dilianapolanco@bluedande	liontherapy.com	
	E-mail address: (to be used for future annual report no	tification)
For further information of	concerning this matter, please c	all;	
Diliana Polanco		321 722-7393	
Name o	of Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fcc	☐ \$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 Addres		Street Address:	
Registration S Division of C		Registration S	
P.O. Box 632	•	Division of Co The Centre of	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blue Dandelion Integrative Therapy, LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 05/26/2020	and assigned
Florida document number L20000141372		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
NIA NIA		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		269
Enter new mailing address, if applicable:		20 FE
(Mailing address MAY BE A POST OFFICE BOX)		8 2 8 3
		2 G.
		<u> </u>
B. If amending the registered agent and/or registered office a	ddress on our records, <u>enter the nar</u>	ne of the new registered
agent and/or the new registered office address here:		3
N	,	
Name of New Registered Agent:	/_	
New Registered Office Address:		
	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

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>	Address	Type of Action
AMBR	Arturo Polanco	1082 Bainbury Ln. West Melbourne, FL 32904	□Add
			Remove
_			□Change
			□Add
		□ Change	
			□Change
			□Add
			Remove
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ective date, if other than the da	te of filing:	MIA	(optional)	44
reffective date is listed, the date must be te: If the date inserted in this block	does not meet the applicable	date of fiting or more than le statutory filing requir	10 days after filing.) Pursuant to ements, this date will not be	605.0207 listed as
cument's effective date on the Depa	rtment of State's records.			
cord specifies a delayed effective d s filed.	ite, but not an effective time	2, at 12:01 a.m. on the e	irlier of: (b) The 90th day a	after the
a riicu.				
ed February, 19th	2021			
cu	,	•		
	MALIN			
Six	nature of a member or authoriz	zed representative of a mer	nher	-

Typed or printed name of signee