

L2L000285304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

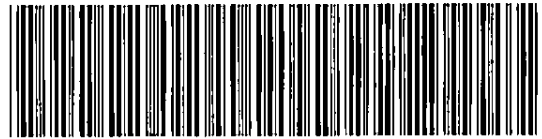
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700393542077

08/30/22--01007--013 ♦♦25.00

2023 MAR -9 AM 7:37

700393542077

A. EUTLER

MAR 10 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Access to Wellness Individual and Family Counseling and Community Outreach Services L.L.C.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Irisdomar Santiago Molina

Name of Person

Access to Wellness Individual and Family Counseling and Community Outreach Services, LLC
Firm/Company

3203 Zander dr. apt 102 Kissimmee FL 34747

Address

Kissimmee, Florida 34747

City/State and Zip Code

irisdomar.santiago@gmail.com

E-mail address: (to be used for future annual report notification)

JAN 25 2023

For further information concerning this matter, please call:

Irisdomar Santiago Molina

Name of Person

at (407) 300-6548

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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)

\$25 Money order was previously sent and cashed out. I spoke with a representative from Division of Corporations, who told me that I don't need to send a \$25 money order again. A signature was needed in one of the forms and your organization sent them back to me, but I didn't receive them. Please, accept this new forms to change organization's name (LLC) and address (physical).

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

Thank you!

Irisdomar Santiago,
407-300-6548

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Access to Wellness Individual and Family Counseling and Community Outreach Services, L.L.C.
(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 09/11/2020 and assigned Florida document number L20000285304.

This amendment is submitted to amend the following:

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

Access to Wellness L.L.C.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1317 Edgewater Dr #2842
Orlando, FL 32804

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3203 Zander Dr apt 102
Kissimmee FL 34747

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ISA
ATA Irisdomar Santiago Molina (no change: in registered agent)

New Registered Office Address:

1317 Edgewater Dr #2842

Enter Florida street address

Orlando

City

Florida

32804

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.

Irisdomar Santiago Molina
No changes made for New Registered Agent
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>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

N/A
Judsonna Santiago
21-JAN-2023

A hand-drawn graph on lined paper. A straight line is drawn diagonally from the bottom left towards the top right. The line starts near the bottom left corner and extends towards the top right corner. The label "N/A" is written in the bottom left corner of the graph area.

NIA

Analomen, Sachbay

21-JAN-2023

January 21st, 2023

(optional)

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.

Dated January 21st 2023

July 2, 2023
Anderson University, Indiana

Signature of a member or authorized representative of a member

Irisdomar Santiago Molina

Typed or printed name of signee

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2023

IRISDOMAR SANTIAGO MOLINA
32303ZANDER DR
APT 102
KISSIMMEE, FL 34747

SUBJECT: ACCESS TO WELLNESS INDIVIDUAL AND FAMILY COUNSELING
AND COMMUNITY OUTREACH SERVICES L.L.C.
Ref. Number: L20000285304

We have received your document for ACCESS TO WELLNESS INDIVIDUAL
AND FAMILY COUNSELING AND COMMUNITY OUTREACH SERVICES L.L.C.
and your check(s) totaling \$25.00. However, the enclosed document has not
been filed and is being returned for the following correction(s):

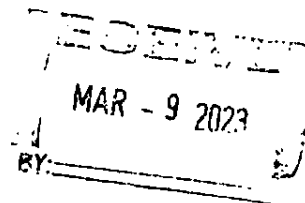
The registered agent must sign accepting the designation.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 722A00026790



The UPS Store®



109 Ambersweet Way
Davenport, FL 33897
863.420.1476 Tel
863.420.1524 Fax
store5556@theupsstore.com
theupsstorelocal.com/5556

~~Fax~~ Letter sent

To Florida Department of State

From Irishman Santiago

Company Division of Corporations

Phone number 407-300-6548

Fax number _____

Fax number _____

Date 04-march-2023

Total pages _____

Job number _____

Greetings,

Please note, you are requesting Registered agent must sign accepting designation in your letter. There are no changes in Registered agent, just address and Name of LLC - I signed and included my name under new registered agent in case you need my name and signature, and included new Registered office address in case you need it. All pages are signed. I'm the only registered agent. Please note, I've sent these documents 2 times. Anything else needed, please let me know.

Thank you,
Irishman Santiago