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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Begin Again Counseling Services, LLC
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:

Angela Corbett
Name of Person

TrueCandor Behavioral Health
Firm/Company

1202 Florablu Dr.
Address

Seffner, FL 33584
City/State and Zip Code

angela@truecandor.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela Corbett at 813 453-0337
Name of Person 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)

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**

Begin Again Counseling Services, 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 9/17/2020 and assigned Florida document number 1.20000202374.

This amendment is submitted to amend the following:

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

TrueCandor Behavioral Health, LLC

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:

6338 US Hwy 301 S.

(Principal office address MUST BE A STREET ADDRESS)

Riverview, FL 33578

Enter new mailing address, if applicable:

1202 Florablu Dr.

(Mailing address MAY BE A POST OFFICE BOX)

Seffner, FL 33584

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:

Angela Corbett

New Registered Office Address:

1202 Florablu Dr.

Enter Florida street address

Seffner

Florida 33584

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

