## L20000384383

(Re	questor's Name)	
(Ad	dress)	
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(Cit	:y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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# COVER LETTER

NAME CECILIA IBE ADDRESS 2095 CLUB LAKE BRIVE ORANGE PARK FL 320-65

PHONE #: 305 335 7131

#### **COVER LETTER**

TO: Registration S Division of Co				
Ç	THE LABOR E DOD	TO MITTER A MINO		
SUBJECT:	TEMPLE POIN	T WELLNES		
	Name of Li	mited Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.		
Please return all correspondent	ondence concerning this matte	r to the following:		
	CECIL	IA I. IBE		
		Name of Person		
•	Temple PoinT	Firm/Company	ESS WELLNESS	i_LC
	2095 CLUB	LAKE DRIVE		
		Address		
	ORANGE PA	RK FLORIDA 32065		
	HECEGIDEAU	City/State and Zip Code		
	IFECEEIBE@H0	to be used for future annual report noti	fication)	
For further information c	oncerning this matter, please o	•	,	
CECILI	A IBE	305 3357131		
Name o	f Person	at () Area Code Daytim	e Telephone Number	
Enclosed is a check for th	e 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	••	S		

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

TTEMPLE POINT WELLNESS LLC		
(Name of the Limited Liability C (A Florida Lin	company as it now appears on our records nited Liability Company)	<u>)</u>
The Articles of Organization for this Limited Liability ComFlorida document number $\frac{L20000384383}{L20000384383}$ .	pany were filed on 01/11/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	20 
TEMPLE POINT WELLNESS LLC		23
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:		20
Principal office address MUST BE A STREET ADDRES	SS)	
-		0 Pi 2:27
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered of	Tice address on our records, enter t	he name of the new regist
gent and/or the new registered office address here:	nee address on our records, enter t	ne name of the new regist
Name of New Registered Agent:		<del></del>
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	City	Zin 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 Ag	ent, Signature of New Regi	stered 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 N	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			Change
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`an effect <u>fote:</u> If	e date, if other the tive date is listed, the tate inserted in the date of the tate of the date of the tate of the	e date must be speci in this block does	ific and cannot be p s not meet the ap	plicable statuto	ing or more than ry filing requir	(optional) 00 days after filing ements, this date	) g.) Pursuant to 605.02 e will not be listed
record s I is filed	specifies a delayed l.	l effective date, b	out not an effectiv	e time, at 12:0	1 a.m. on the ea	ırlier of: (b) T	he 90th day after th
ated	ctober 20		2023				
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		Signatur	re of a member or a	uthorized repres	entative of a men		\$