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## **COVER LETTER**

TO:	Registration Se Division of Corp					
CHD I	rær.	Bradenton Best Life Co	ounseling Center LLC			
SUBJ	ECT:	Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub	_			
		Dr. Karmon Sears				
			Name of Person	<del></del>		
		Bradenton Best Life Coun	seling Center, PLLC			
			Firm/Company			
		9040 Town Center Pkwy				
		Address				
		Lakewood Ranch, Florida	34202			
			City/State and Zip Code			
		karmonsears@bradentonbe	*			
			to be used for future annual report notific	eanon)		
For fur	ther information co	oncerning this matter, please ca	al):			
Brend	en S. Moriarty, Esq	<b>l</b> .	865 584-4040 at ( )			
	Name of	Person		Telephone Number		
Enclos	ed is a check for th	e following amount:				
<b>≡</b> \$2	5.00 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 S		Street Address: Registration Sect	ion		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	Bradenton Best Life Counse	ling Center, I	.LC			
· · · · · · · · · · · · · · · · · · ·	Name of the Limited Liability Company as (A Florida Limited Liabili	it now appea ity Company)	rs on our records.)			
The Articles of Organization fo	or this Limited Liability Company were	e filed on	January 19, 2021	and assigned		
Florida document number	L210000 3796]					
This amendment is submitted t	o amend the following:					
A. If amending name, enter t	the new name of the limited liability	company he	ere:			
Bradenton Best Life Counse	ling Center, PLLC					
The new name must be distinguishab	le and contain the words "Limited Liability Co	ompany," the d	esignation "LLC" or the al	obreviation "L.L.C."	· •	24
Enter new principal offices a	ddress, if applicable:				·	$\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}}}}}^{\mathcal{L}_{\mathcal{L}}}}}}}}}}$
(Principal office address MUS	T BE A STREET ADDRESS)				•	<del>-0</del>
			· •	<u></u>		0
Parameter 11	- 10 A.I				• • • •	42. T
Enter new mailing address, if	••			<del></del>		άi
(Mailing address MAY BE A l	<u> </u>				3.17	ယ္ဆ
				<del></del>		w
B. If amending the registered agent and/or the new register	agent and/or registered office addre ed office address here:	ess on our r	ecords, <u>enter the nam</u>	e of the new registered		
Name of New Registe	red Agent:					
New Registered Offic	e Address:	Enter Flor	ulu street address			
		Line 1107	rom or all Gifts Lid			
	<del></del>	Cin	, Florida	Zin Code		
New Registered Agent's Signate	tre, if changing Registered Agent:			гу соце		

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 = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			: ПRетюче
			□Change
			DAdd
			□Remove
			Change
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	other information, enter change(s) here: (Attach additional sheets, if necessary.)
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•	
an effective date is l ote: If the date in	other than the date of filing:  (optional)  isted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.026  isserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a  ve date on the Department of State's records.
ecord specifies a is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
July 22	Print 1/1 / Dalla
	Signature of a member of authorized representative of a member
	/ / / / / / / / / / / / / / / / / / / /
	Karmon Sears  Typed or printed name of signee

Filing Fee: \$25.00