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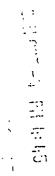
(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO:

Registration Section

Division of Co	rporations			
Joyce Suc	cess Coach LLC			
SUBJECT:Name of Limited Liability Company				
The analogue Acticles of	Amendment and fee(s) are sub	mitted for filing		
Please return all corresp	ondence concerning this matter	to the following:		
	Joyce Bartels Daal			
		Name of Person		
	Joyce Success Coach LLC			
		Firm/Company		
	8990 S Hollybrook Blvd /	Apt 104		
	*****	Address	•	
	Pembroke Pines, FL 3302.	5		
	Control of the second	City/State and Zip Code	.	
	joyce@thebestbrowardhom E-mail address: (to be used for future annual report not	ification)	
For further information	concerning this matter, please c			
Joyce Bartels Daal		954 663-2900		
Name	of Person	at () Area Code Daytin	ne 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre		Street Address:	nation	
Registration Division of 6	Section Corporations	Registration Se Division of Co		
P.O. Box 63		The Centre of	•	
Tallahassee.			oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L21000188949}{L21000188949}$.	were filed on April 21, 2021	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable:	8990 S HOLLYBROOK BLVD APT 104		
(Principal office address MUST BE A STREET ADDRESS)	PEMBROKE PINE, FL 33025		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the nam	e of the new regi	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	. Florida		
	City . Flortda	Zip Códe	

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
			□Add
			□Remove
			□Change
		 	□Add
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lf an effecti <u>Note:</u> If t	date, if other than the dive date is listed, the date must have date inserted in this bloce's effective date on the Dep	e specific and cannot be pr k does not meet the app	licable statutory fili		iling.) Pursuant to 605.0207
e record sp rd is filed.	pecifies a delayed effective o	date, but not an effective	e time, at 12:01 a.m	, on the earlier of: (b)	The 90th day after the
Dated Se	ptember 29	2021	·		
	Joyce Bartels Daal	1			
	S	ignature of a member or at	thorized representativ	re of a member	

Filing Fee: \$25.00