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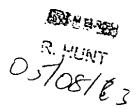
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COVER LETTER

TO:

TO: Registration Se Division of Cor			
305 ABA I			
SUBJECT:		uited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	-	
	BLANCA DIAZ		
		Name of Person	····
		Firm/Company	
	SUN -8 PH 2: I		
		Address	
	MIAMI, FL 33137		報 2: EE.F
	BDIAZ0402@GMAIL.CO	City/State and Zip Code M	
		to be used for future annual report notif	ication)
For further information of BLANCA DIAZ	oncerning this matter, please c	ali: 786 2617144	
Name of Person		at ()	: Telephone Number
		•	•
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 5		Street Address: Registration Sec	tion
Division of C		Division of Con	
P.O. Box 632	7	The Centre of T	allahassee
Tallahassee, l	FL 32314	2415 N. Monroe	Street, Suite 810

Taliahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liabilit</u> (A Florida	ty Company Limited Liab	as it now appears on our re pility Company)	cords.)			
The Articles of Organization for this Limited Liability Company were filed on 05/27/2021 Florida document number L21000248672				and assigned		
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limi	ited liabilit	y company here:				
ILLUMIN8 INSIGHT BEHAVIORAL CONSULTING LLC	~			- ,		
The new name must be distinguishable and contain the words "Limi	ited Liability	Company," the designation "	LLC" or the abbrey	ation L.	"C."	
Enter new principal offices address, if applicable:		4600 SW 75TH AVE #2B	•	• •	•	
(Principal office address MUST BE A STREET ADDRI		MIAMI, FL 33155		: 🖒		
	_			·		
Enter new mailing address, if applicable:		4600 SW 75TH AVE #2B	ind Pa	12:11		
(Mailing address MAY BE A POST OFFICE BOX)		MIAMI, FL 33155				
B. If amending the registered agent and/or registered agent and/or the new registered office address here:		iress on our records, <u>er</u>	iter the name of	the new	register	
Name of New Registered Agent:	BLANCA DIAZ					
New Registered Office Address: 4600 S	SW 75TH A					
		Enter Florida street aa	ldress			
MIAM	11 		. Florida 33155			
		City	Z	ip Code		

New Registered Agent's Signature, if changing Registered Agent:

ABA 305 LLC

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

Title	Name	<u>Address</u>	Type of Action
			□Add
			□Remove
			□ Change
			□Add
			Remove
			Add Remove
			Change
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Effective date, if other than fan effective date is listed, the dat Note: If the date inserted in the document's effective date on the date in the date on the date on the date on the date on the date of the dat	his block does no	ot meet the applic	able statutory f	or more than 90 days iling requirements	optional) after filing.) Purs , this date will	mant to 6 not be li	05.0207 isted as
e record specifies a del The 90th day after the			ot an effectiv	e time, at 12:0	01 a.m. on t	he ear	tier of
·			•				
Dated 5/1		_ `					
·	Signature of	f a member or auth	orized representa	tive of a member			

Page 3 of 3

Filing Fee: \$25.00