L21000534607

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

Office Use Only



200367183422

01/19/22--01002--013 **25.00

JAH 1 8 2022 D COMMELL

H 3: 26 2022 JAN 18 PH 3: 48

SECRETARIAN SECURETARIAN SE

COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor		•	
SURJECT: Fnh	ance Mediatio	n Group 11	C
<u></u>	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	<u>Jermane</u>	C. Sm. 4h	Sr
	Enhance 1	<u>Mediations</u> <u>Service</u> Firm/Company	es LLC
		Southside Blyd Address	1204
	Jacksonville	Pl 32366 City/State and Zip Code	
		· ·	
	E-mail address: (1	to be used for fidure annual report noti	fication)
For further information e	oncerning this matter, please ca	all:	
Jermaine.	Smith	at (<u>964</u>) <u>661</u> - Area Code Daytim	807/
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address:	
Registration !		Registration Se	
Division of C P.O. Box 632	•	Division of Cor The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Enhanced Me	diation Group LLC
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) Tability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000534607</u> .	were filed on $\frac{12/31/3001}{3000}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
Enhance Mediation Services LLC The new name must be distinguishable and contain the words "Limited Liability"	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7932 Santisde Blud # 1204
(Principal office address MUST BE A STREET ADDRESS)	7932 Santisde Blud # 1204 Jacksonville Fl 32256
Enter new mailing address, if applicable:	7932 Southside Blyd # 1204 Jacksonville Fl 32256
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville Fl 32256
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Florida street address Florida City Address on our records, enter the name of the new registered A City
	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 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
MGR	Jermaine C. Smith Sr.	7932 Southside Blied # 1204	□Add
		Jacksoville Fl 32286	□Remove
			\$ Change
			🗆 Add
			□Remove
			□ Change
	<u> </u>	<u> </u>	🗆 Add
			□Remove
			□Change
***			□Add
			□Remove
			□Change
	<u></u>		□Add
			□Remove
			□Change
			🗀 Add
			Remove
			Changa

				<u>-</u> _	•		· · · · · ·		-,
									<u> </u>
									
							-		
								· <u></u>	
								···	
						,			
			_						
					· ·				MARK T
effectiv <u>e:</u> If the	ve date is list he date inse	her than the ded, the date must be created in this block date on the Dep	e specific and k does not i	d cannot be p neet the ap	olicable statu	filing or more tory filing re	than 90 days af	tional) ter filing.) Pur his date will	suant to 605,020 not be listed a
cord sp i filed.	oecifies a de	layed effective o		t an effectiv	e time, at 12	:01 a.m. on ŧ	he earlier of:	(b) The 90	h day after the
ed	Jan	18 42		. <u>202</u>	土.				
		a.		Ç	Q				
	****	Fina	gnature of a	member or a	uthorized repr	esentative of	member	· · · · · · · · · · · · · · · · · · ·	