From; Laura Rodriguez

8/31/22, 9:26 AM

Division of Corporations

Florida Department of State 2975 Electronic Elling Cover Sheet

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Electronic Filing Menu

Corporate Filing Menu

Help

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COVER LETTER

TO:	Registration Sec Division of Corp		•	,		
CHR. IC.		COUNSELING, PLLC				
20R1F	СТ:	Name of Lim	ited Liability Company	·		
The enc	losed Anicles of A	Amendment and fee(s) are sub	mitted for filing			
Please re	etumi al! correspor	ndence concerning this matter	to the following:			
		Cheyenne Moseley				
			Name of Person			
		Legalzoom.com, Inc.				
			Firm/Company			
		101 N Brand Blvd 11th Fl				
			Address			
		Glendale, CA 91203				
		City/State and Zip Code				
		E-mail address: (to be used for future annual report notifi	cation)		
For furt	her information co	incerning this matter, please c	all:			
Cheyen	ne Moseley		\$00 773-0888			
Name of Person		at ()	Telephone Number			
Enclose	đ is a check for th	e following amount:				
□ \$ 25	00 Fiting 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 Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Page: 4 of 6

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

DIGNITY COUNSELING, PLLC		
(Name of the Limited Liability Company as it now appears on our res (Λ Florida Limited Liability Company)	cords.)	
The Articles of Organization for this Limited Liability Company were filed on 01/11/2022 Florida decument number L22000023975	and as	signed
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
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:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		***
	20	of the no
B. If amending the registered agent and/or registered office address on our recordistered agent and/or the new registered office address here:	enter the name	
Name of New Registered Agent:		
New Registered Office Address:	idiess RD ::	
Enter Florida street ad	idress 🚉 🗀	
	. Florida 😽 🔫	

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.

Cuy

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

To:

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	<u>Name</u>	Address	Type of Action
AMBR	FORMAN-KRAFT, BRANDY		
		1012 E SILVER SPRINGS BLVD, SUITE B OCALA, FL 34470	■ Remove
			Change
AMBR	FORMAN, BRANDY	1012 E SILVER SPRINGS BLVD, SUITE B OCALA, FL 34470	= Add
			Remove
			Change
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record specifies a delay The 90th day after the r	ed effective date, but not an effec ecord is filed.	tive time, at 12:01 a.m. on the	e earlier of:
ned <u>August 2</u>	2012 Signature of a member or authorized represe	·	
- Gran	Ly-torman		
~	Agnature of a member or authorized represe	ntative of a member	
Brandy Forman	Typed at printed mane of significant		

From: Laura Rodriguez

Ta:

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Filing Fee: \$25.00