## 122000195740

(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:

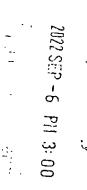
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J9/10/2022

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: LIMIT	Hess Behavi	oral Services, ted Liability Company	LLC
	Name of Limit	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	Catherine I	Name of Person	
		Firm/Company	
	655 West	71St Place Address	<u> </u>
		City/State and Zip Code	
	Catherine, E-mail address: (	o be used for future annual report notif	fication)
For further information co	oncerning this matter, please co	all:	
Catherine Name of	Rodrigue 2  TPerson	at (305) 9650 Area Code Daytime	e Telephone Number
Enclosed is a check for th	e 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 Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section Torporations 7	Street Address: Registration Seconds of Core The Centre of To 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810



August 14, 2022

CATHERINE RODRIGUEZ 655 W 71 PLACE HIALEAH, FL 33014

SUBJECT: LIMITLESS BEHAVIORAL SERVICES, LLC

Ref. Number: L22000195740

We have received your document for LIMITLESS BEHAVIORAL SERVICES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 222A00018109

Claretha Golden Regulatory Specialist II

Se2 0 6 2022

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Limites Benavioral Services, LC 2022 SEP - 6 PH 3:00

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(	
The Articles of Organization for this Limited Liability Florida document number _L22000195	y Company were filed on 04 25 2022 and assigned
This amendment is submitted to amend the following	:
A. If amending name, enter the new name of the l	imited liability company here:
The new name must be distinguishable and contain the words "I	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 AD	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on our records, <u>enter the name of the new registered</u> e:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
<del></del>	, Florida City Zip Code
New Registered Agent's Signature if changing Registe	ered Agent:

## New Registered Agent's Signature, il 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>	Name	Address	Type of Action
<u>CEO</u>	Catherine Rodriguez	655 W 715+ Place	□ Add
		Hialean, FL 33014	⊠Remove
		paratist,	□Change
MHR	Catherine Rodriguez	USS W 715 Place	ØAdd
		Hialean IFL 33014	□Remove
			□Change
			□Remove
			□Change
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effe <u>e:</u> I	ve date, if other than the date of filing:	605.02 listed
ord file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a ed.	ıfter t
:d <u></u>	August 23,2022 2022	_
	Signature of a member or authorized representative of a member	