

h22000401443

(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:

J DENNIS

JAN - 4 2023

A.

Office Use Only



000395486230

10/11/22--01019--007 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2022 OCT 11 PM 2:26

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S & Y Behavior Miami LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Saray Suarez

Name of Person

S & Y Behavior Miami LLC

Firm/Company

11845 SW 194 Terrace

Address

Miami, FL 33177

City/State and Zip Code

saraysuarez@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Saray Suarez

at (786) 712-7219

Name of Person

Area Code

Daytime 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)

☐ \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

S & Y Behavior Miami LLC

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Saray Y Suarez	11845 SW 194 Terrace Miami, FL 33177	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Saray Suarez	11845 SW 194 Terrace Miami, FL 33177	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The above change is only to remove an initial that was incorrectly included in the name of the MGR.

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated October 05 2022

authorized representative

Signature of a member or authorized representative of a member

Saray Suarez

Typed or printed name of signee