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04/02/24--01023--007 *#25.00

COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Cor					
SUBIEC'		HENSIVE FAMILY SERVICE	ES, LLC			
SUBJEC'	1.	Name of Lim	ited Liability Company			
The enclo	sed Articles of	Amendment and fee(s) are sub	emitted for filing.			
Please ret	urn all correspo	ondence concerning this matter	to the following:			
		BELKIS CANDELIER				
		,	Name of Person			
		COMPREHENSIVE FAM	IILY SERVICES, LLC			
			Firm/Company			
		1729 NW SLW BLVD., N	IO. 1004			
			Address			
		PORT SAINT LUCIE, FL 34986				
		City/State and Zip Code				
		belkiscandelier@gmail.com	1			
		E-mail address: (to be used for future annual report not	ification)		
For furthe	r information c	oncerning this matter, please c	all:			
Belkis Ca	ndelier		561 578-0193 at()			
	Name o	f Person		ne Telephone Number		
Enclosed i	is a check for th	he following amount:				
\$25.0	0 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		Street Address:			
Registration Section Division of Corporations P.O. Box 6327		Registration Se Division of Co				
		-	The Centre of			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

COMPREHENSIVE FAMILY SERVICES, LLC

2024 APR -2 DU 3: 26

(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 Company were filed on $\frac{9/19/2022}{1}$ Florida document number _____L22000406982 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1729 NW SLW BLVD., NO. 1004 Enter new mailing address, if applicable: PORT SAINT LUCIE, FL 34986 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 Changing Registered Agent, Signature of New Registered Agent

___, Florida __

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	BELKIS BELKIS	1729 NW SLW BLVD. NO.1004	
		PORT SAINT LUCIE. FL 34986	≣Remove
			□ Change
MGR	BELKIS CANDELIER	1729 NW SLW BLVD., NO. 1004	
		PORT SAINT LUCIE, FL 34986	□Remove
			□Change
			□Add
			□Remove
		 	□ Change
			□Add
			□Remove
			□ Change
			□ Add
			□ Remove
			□Remove
			□ Change

	ther information, enter change(s) here: (Attach additional sheets, if necessary.)
	
<u> </u>	***************************************
	
	
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Note: If the date inso	her than the date of filing:
ne record specifies a de ord is filed.	elayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated MARCH 25	2024
	Bullis Candulus Signature of a member or authorized representative of a member
BELKIS (CANDELIER
	Typed or printed name of signee

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