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COVER LETTER

TO: Registration Sec Division of Corp		,	
SUBJECT: AP (Oaching & Cons Name of Lim	offing LLC ited Liability Company	
The enclosed Articles of A	mendment and fec(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Andrew Pl	SNEX Name of Person	
	AP Coaching	8 Consulting, LLC Firm/Company	
	6823 4th Ave	Address	
	Saint Petersburg aplis 90 @g	Imail. Com	
For further information co	E-mail address: (neerning this matter, please co	to be used for future annual report notifiall;	heation)
Andrew P Name of		at (<u>313</u>) <u>4/0 -</u> Area Code Daytime	8731 e 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:	1	Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ND Couling & Consulting, LLC

(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 12 0005 2018</u> リー	were filed on Pecember 12, 201	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Andrew Plisner Therapy & Consultante name must be distinguishable and contain the words "Limited Liabi	ting, LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the al-	obreviation "L.L.C."
Enter new principal offices address, if applicable:	6823 4th Avenue North	1
(Principal office address MUST BE A STREET ADDRESS)	Saint letersburg, FL 3:	3710
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6823 4th Avenue North Saint Refers burg, FL 3	h 3710
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nam</u>	ne of the new registere
Name of New Registered Agent:		19
New Registered Office Address:		<u> </u>
	Enter Florida street address , Florida	111:2
	City , Florida	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
			□Remove
			□ Change
			☐ Add
			ПRетюve
			□ Change
			Add
			Add
			Change
			□Remove
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			□Remove
			□Change

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fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date.	
ote: If the date inserted in this block does not meet the applicable stacement's effective date on the Department of State's records.	atutory thing requirements, this date will not be listed :
ecord specifies a delayed effective date, but not an effective time, at is filed.	12:01 a.m. on the earlier of: (b) The 90th day after th
sted July 13th 2024 Andrew Planes Signature of a member or authorized re	
Ardau Planes	
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