Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PRONTO TAX & ACCOUNTING SERVICES, INC

Account Number : I20090000095 Phone : (305)267-1092 Fax Number : (305)267-2819

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: 10010nad

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TJ BEHAVIORAL SERVICES, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

((| 23000090888 3))) ARTICLES OF AMENDMENT

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TJ BEHAVIORAL SERVICES, LLC		
(Name of the Limited Lia (A Flo	bility Company as it now appears on our records.) orda Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L23000078007	y Company were filed on MARCH 7, 2023	and assigned
This amendment is submitted to amend the following	;;	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "LLC" or the	e 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)		
D. Marrie and an address of a second and dam are also as		720 200 200 200 200 200 200 200 200 200
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered dince address on our records, <u>enter the n</u>	-
Name of Name Businessed Agents		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	2: 42
	, 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 Changing Registered Agent, Signature of New Registered Agent

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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
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