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COVER LETTER

Through the Woods Counseling 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: William Stewart	~	tration Sec ion of Corp		•				
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: William Stewart Name of Person Bookkeeping & Tax Center, Inc. Firm/Company PO BOX 2410 Address Alachua, FL 32616 City/State and Zip Code alachuatax@outlook.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: William Stewart Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Certificate of Status Certificate of Status & Certifical Copy (additional copy is enclosed) Certificate Copy (certificate Of Status & Certifical Copy)	7	Through the	Woods Counseling LLC					
William Stewart Name of Person	SUBJECT: _		Name of Lim	ited Liability Company				
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	\$25.00 Fil	ing Fee		Certified Copy		Certificate of Status & Certified Copy		
Mailing Address: Registration Section Street Address: Registration Section								
Division of Corporations Division of Corporations	Divi	sion of Co	orporations	Division of Corporations				
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810								

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Through the Woods Counseling, LLC	
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	y were filed on 06/21/2023 and assigned
Florida document number 1.23000298026	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	<u></u>
	73
Enter new mailing address, if applicable:	<u></u>
(Mailing address MAY BE A POST OFFICE BOX)	23
	7
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
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent	:

New Registered Agent's Signature, it 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
MGR	Holder, Brittany	718 NE 7th Place Apt 502	□Add
		Trenton, FL 32693	Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
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ective date, if other than the date of filing: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 605.0
e: If the date inserted in this block does not meet the all ament's effective date on the Department of State's rec	pplicable statutory filing requirements, this date will not be listed ords.
eord specifies a delayed effective date, but not an effecti- filed.	ive time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
ed August 22 2023	
111111	·
- MANUS THAT IET	authorized representative of a member

Filing Fee: \$25.00