## L23000372236

| (1                   | Requestor's Name)       |          |
|----------------------|-------------------------|----------|
| (,                   | Address)                |          |
| (,                   | Address)                |          |
| (1                   | City/State/Zip/Phone #) |          |
| PICK-UP              | ☐ WAIT                  | MAIL     |
| (                    | Business Entity Name)   |          |
| ((                   | Document Number)        |          |
| Certified Copies     | Certificates of :       | Status   |
| Special Instructions | to Filing Officer       |          |
|                      |                         |          |
|                      |                         |          |
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Office Use Only



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08/22/23--01020--005 \*\*25.00



A. RIVERS 0CT 1 2 2023

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

|                                                                                                                                                                                                                                                                            | Or                                                                                                                                             |                          |             |              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------|--------------|
| Counselina                                                                                                                                                                                                                                                                 | Creatively, LLC                                                                                                                                |                          |             |              |
| (Name of the Limited Liab<br>(A Flori                                                                                                                                                                                                                                      | ility Company as it now appears on our records.) da Limited Liability Company)                                                                 | ····                     | _           |              |
| The Articles of Organization for this Limited Liability Florida document number                                                                                                                                                                                            | Company were filed on                                                                                                                          | ِرِّے and                | l assigi    | ned          |
| This amendment is submitted to amend the following:                                                                                                                                                                                                                        |                                                                                                                                                |                          |             |              |
| A. If amending name, enter the new name of the lin                                                                                                                                                                                                                         | nited liability company here:                                                                                                                  |                          |             |              |
| The new name must be distinguishable and contain the words "Lin                                                                                                                                                                                                            | mited Liability Company," the designation "LLC" or the                                                                                         | abbreviation             | 1"L.L.C     | <del> </del> |
| Enter new principal offices address, if applicable:                                                                                                                                                                                                                        |                                                                                                                                                |                          |             |              |
| (Principal office address MUST BE A STREET ADD                                                                                                                                                                                                                             | RESS)                                                                                                                                          |                          |             |              |
|                                                                                                                                                                                                                                                                            |                                                                                                                                                |                          |             |              |
| Enter new mailing address, if applicable:                                                                                                                                                                                                                                  |                                                                                                                                                |                          |             | <u></u>      |
| (Mailing address MAY BE A POST OFFICE BOX)                                                                                                                                                                                                                                 |                                                                                                                                                |                          | <del></del> |              |
| B. If amending the registered agent and/or registere agent and/or the new registered office address here:  Name of New Registered Agent:                                                                                                                                   | ed office address on our records, enter the nar                                                                                                | ne of the                | new ro      | egistered    |
| New Registered Office Address:                                                                                                                                                                                                                                             | -                                                                                                                                              | - (T)                    | 2602        |              |
|                                                                                                                                                                                                                                                                            | Enter Florida street address Florida                                                                                                           | 152                      |             |              |
|                                                                                                                                                                                                                                                                            | City                                                                                                                                           | Zip Cod                  | gs          |              |
| New Registered Agent's Signature, if changing Registered                                                                                                                                                                                                                   |                                                                                                                                                |                          |             |              |
| hereby accept the appointment as registered agent provisions of all statutes relative to the proper and concept the obligations of my position as registered ageing filed to merely reflect a change in the registere company has been notified in writing of this change. | omplete performance of my duties, and I am<br>gent as provided for in Chapter 605, F.S. Or,<br>ed office address, I hereby confirm that the li | familiar v<br>if this de | Vilh ai     | nd.          |
|                                                                                                                                                                                                                                                                            |                                                                                                                                                |                          |             |              |

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> | Type of Action |
|--------------|-------------|----------------|----------------|
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| -              | See Attached purpose                                                                                                                                                                 |
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| n effe         | te date, if other than the date of filing:                                                                                                                                           |
| te.            | f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed and seffective date on the Department of State's records. |
| . umc          | in a criedive date on the Department of State's records.                                                                                                                             |
|                |                                                                                                                                                                                      |
| cora<br>s file | 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                                                          |
| •              |                                                                                                                                                                                      |
| ਦੂਰ            | August 18th 2023                                                                                                                                                                     |
| ```            | August 18th 2023                                                                                                                                                                     |
|                | Chan HITM                                                                                                                                                                            |
|                | Signature of a member or authorized representative of a member                                                                                                                       |
|                | Jone He D. Macias Typed or printed name of signee                                                                                                                                    |
|                |                                                                                                                                                                                      |

Filing Fee: \$25.00



September 28th, 2023

To Whom it may concern:

My name is Janette D. Macias and I am the registered agent and CEO of Counseling Creatively.

Thave completed the Articles of Amendment to Articles of Organization form which is attached here.

My application/form was returned due to missing the "specific purpose of the entity." Counseling Creatively is a private practice mental health counseling office/business.

Lam a Licensed Mental Health Counselor here in the state of Florida, hence why Lam amending the name of my business to Counseling Creatively, PLLC due to being a Professionally licensed Limited Liability Corporation. For you records, my Florida LMHC license number is MH22483 and is effective as of 7/12/23 through 3/31/25.

Please let me know if there is anything else you need to finish the filing of this amendment.

Thank you for your time.

Best wishes.

Janette D. Macias, LPC-S, ATR-BC, LMHC, NCC

Licensed Professional Counselor-Supervisor-TX Board Certified Registered Art Therapist Licensed Mental Health Counselor-FL National Certified Counselor Counseling Creatively, PLLC www.CounselingCreativelyPLLC.com 469-294-2600



September 16, 2023

JANETTE MACIAS 18331 PINES BLVD # 1154 HOLLYWOOD, FL 33029

SUBJECT: COUNSELING CREATIVELY, LLC

Ref. Number: L23000372236

We have received your document for COUNSELING CREATIVELY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6353.

Alecia Rivers Regulatory Specialist III

Letter Number: 123A00021368

JULY 2023