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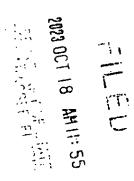
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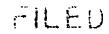
A. RAMSEY OCT 26 2023

COVER LETTER

	egistration Se ivision of Cor				
SUBJECT: STATE OF MIND ABA SERVICES LLC					
					The enclose
Please retur	rn all correspo	ndence concerning this matter	to the following:		
		DALIANA YSTOKAZU (GOMEZ		
	Name of Person				
STATE OF MIND ABA SERVICES LLC					
Firm/Company					
12985 SW 130TH CT # 103					
			Address		
		MIAMI, FL 33186			
			City/State and Zip Code		
		stateofmindabaservices@gr		···	
For further	information c	e-man address: (oncerning this matter, please c	to be used for future annual report not all:	ification)	
DALIANA YSTOKAZU GOMEZ 305 632-2528 at ()					
	Name o	l' Person		ne Telephone Number	
Enclosed is	s a check for th	ne 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)	
	<u>ailing Addres</u> egistration S		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



STATE OF MIND ABA SERVICES LLC

company has been notified in writing of this change.

2023 OCT 18 AM 11: 55

(<u>Name of the Limited Liabi</u> (A Florid	da Limited Liability Company)	14. 13. 13. 13. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14	
The Articles of Organization for this Limited Liability	Company were filed on 10-06-2023	and assigned	
Florida document number 1.23000461682	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited <u>liability company here</u> :		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."	
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)			
B. If amending the registered agent and/or register	ed office address on our records, e	nter the name of the new regis	
agent and/or the new registered office address here			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street a	Enter Florida street address	
		Florida Zip Code	
	City	Zip Code	
New Registered Agent's Signature, if changing Register	red Agent:		
I hereby accept the appointment as registered agen	it and agree to act in this capacity.	I further agree to comply wit	
provisions of all statutes relative to the proper and	complete performance of my dutie	rs, 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

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>	Address	Type of Action
MGR	DALIANA YSTOKAZU GOMEZ	12985 SW 130TH CT # 103 MIAMI, FL 33186	≅Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
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			□Remove
			Charm.

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: __ (optional) (If an 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 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. October 12 2023 Dated _ Signature of a member or authorized representative of a member DALIANA YSTOKAZU GOMEZ Typed or printed name of signee