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COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Co				
SUBJEC		'S behavior LLC			
SOBJEC		Name of Lin	nited Liability Company		
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ret	turn all correspo	ondence concerning this matter	to the following:		
		Vanessa Betancourt			
			Name of Person	·	
		Betancourts's behavior LL	C		
			Firm/Company		
		27000 SW 167TH AVE			
		·	Address		
		HOMESTEAD FL 33031			
		-	City/State and Zip Code		
		vanessabetancourt631@gm	ail.com to be used for future annual	ronast motifica	
For furthe	r information c	oncerning this matter, please c		report nonnea	adony
	Betancourt	oncorning and matter, prease c		52173188	
	Name of	f Darman	at ()		
	realife of	r r erson	Area Code	Daytime 1	elephone Number
Enclosed i	is a check for th	c following amount:			
□ \$25.0d	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	1ailing Address		Street Ad		
Registration Section Division of Corporations			ition Section of Co rp or		
	O. Box 632			tre of Tall	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Betancourt's Behavior LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ^{08/06/2024} and assigned Florida document number L24000345810 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Betancourt's Behavior LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Vanessa Betancourt Name of New Registered Agent: 27000 sw 167th ave New Registered Office Address: Enter Florida street address , Florida 33031
Zip Code homestead

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

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
AMBR	Vanessa Betancourt	27000 sw 167th ave homestead fl 33031	= Add
			□Remove
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- VIII	e date, if other than the date of tive date is listed, the date must be spec- the date inserted in this block does t's effective date on the Departme	s not meet the applicable	date of filing or more than le statutory filing requir	(optional) 90 days after filing.) Pursuant ements, this date will not	to 605,0207 be listed as
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ocumen record s	/16/2024	out not an effective time , , e of a member or authoriz			y after the

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Filing Fee: \$25.00