LB000/15041

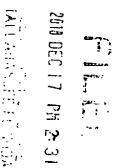
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D. BRUCE JAN 05 2019

COVER LETTER

SUNSPIRE HEALTH FLORIDA, LLC SUBJECT:	
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:	
Edward L. Myrick, Jr.	
Name of Person	-
Beighley, Myrick, Udell & Lynne, P.A.	
Firm/Company	
1255 W. Atlantic Blvd., #314	
Address	
Pompano Beach, FL 33069	2015
City/State and Zip Code	
jtuttle@banyantreatmentcenter.com	
E-mail address: (to be used for future annual report notifi	
For further information concerning this matter, please call:	-\
Edward L. Myrick, Jr. 954 784-3298	12 (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Name of Person Area Code Daytime	Telephone Number
Enclosed is a check for the following amount:	
■ \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section

TO:

Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

9CB-4P

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNSPIRE HEALTH FLORIDA, LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L13000115041	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company." the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	950 N Federal Highway #115
(Principal office address MUST BE A STREET ADDRESS)	POMPANO BEACH, FL 33062
Enter new mailing address, if applicable:	950 N Federal Highway #115
(Mailing address MAY BE A POST OFFICE BOX)	POMPANO BEACH, FL 33062
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	<u>e:</u>
Name of New Registered Agent:	n Mintz
New Registered Office Address: 950 N	Federal Highung #115 in = Emer Florida stree Inddress of Seath Florida 3306, 27 Zip Code; No.
Pompere	Death Florida 3306, 23
New Registered Agent's Signature, if changing Registered Agent:	210 CM2
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is

Page 1 of 3

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
MGR	ROBERT CUCUEL	160 CHUBB AVE STE 206	
		LYNDHURST, NJ 07071	
			■ Remove
			□ Change
MGR	EDWARD DONAHUE	160 CHUBB AVE STE 206	
		LYNDHURST, NJ 07071	
		-	☐ Remove
			Change
MGR	CHRIS DIAMOND	160 CHUBB AVE STE 206	
		LYNDHURST, NJ 07071	Remove
			- Remove
			Change
MGR	JOSEPH TUTTLE	950 N Federal Highway #115	Add DEC
		POMPANO BEACH, FL 33062	Rémove
			Rémove 7
			Change (N)
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(If an effective date is Note: If the date is	f other than the date of the listed, the date must be specifical inserted in this block does to live date on the Department	ic and cannot be prior to da- not meet the applicable :	te of filing or more than 90 d	_(optional) ays after filing.) Pursuan nts, this date will not	it to 605,0207 (3)(I be listed as the
If the record speci (b) The 90th day	ifies a delayed effective after the record is fil	ve date, but not an ed.	effective time, at 12	2:01 a.m. on the	earlier of:
Dated December	12	2018			
	1				
	Signature o	of a member or authorized	representative of a member		
Joseph Joseph	Tuttle, Manager				
· · · - · ·		Typed or printed nam	e of signee		

Page 3 of 3

Filing Fee: \$25.00