## 114000162153

(Re	equestor's Name)	
(Ac	idress)	
(A)	Lil a - a N	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bi	usiness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer	
	Timing Ciliodi.	
		·

Office Use Only



000282627310

02/29/16 -01037--017 \*\*60.00

16 MAR -8 PH 4: 49

MAR 0 9 2016 Y SULKER

## **COVER LETTER**

TO:	Registration Se Division of Cor	ction porations					
		onsultancy, LLC					
SUBJ	Name of Limited Liability Company						
Division of Corporations  Fatenejad Consultancy, 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:  Saeed Fatenejad  Name of Person  Firm/Company  7725 SW 193RD LN  Address  Cutler Bay, FL 33157  City/State and Zip Code sfatenejad@gmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Saeed Fatenejad  Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  S25.00 Filing Fee  S30.00 Filing Fee  Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status							
Please	return all correspo	ndence concerning this matter	to the following:				
		Saeed Fatenejad					
			Name of Person	· · · · · · · · · · · · · · · · · · ·			
			Firm/Company	<del></del>			
		7725 SW 193RD LN					
			Address				
		Cutler Bay, FL 33157					
		sfatenejad@gmail.com	City/State and Zip Code	<del></del>			
		E-mail address: (	to be used for future annual report notific	cation)			
For fu	rther information co	oncerning this matter, please ca	all:				
Saeed							
	Name o	Person	Area Code Daytime	Telephone Number			
Enclos	sed is a check for th	e following amount:					
□ \$2	5.00 Filing Fee						

**MAILING ADDRESS:** 

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

## .. TO. ARTICLES OF ORGANIZATION OF

Fatenejad Consultancy, 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 Oct 14, 2014 and assigned Florida document number L14000162157 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SFC Medica, LLC The new name must be distinguishable and contain the words "Limited 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 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

## 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

or remov	ed from our records:	<b>♥</b> √	
MGR = AMBR =	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
		<u> </u>	Add
			Remove
			Change
			Add
			☐ Remove
			Change
			□ Add
			☐ Remove
			Change
			—————————————————————————————————————
			□ Remove
			Change
			□ Add
			Remove
			Change
•			□ Add
			□ Remove

☐ Change

e e e		
		<del></del>
		<del></del>
		<del>.</del>
		<u></u>
		<del></del>
	1	16
		MAR
		<del></del>
Effective date, if other than the date of filing:	(optional)=:	<b>3</b> (1)
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.) Purs	suant to 605.0207 (
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory fill document's effective date on the Department of State's records.	ng requirements, this date:will i	not be listed as the
he record specifies a delayed effective date, but not an effective	time, at 12:01 a.m. on t	he earlier of:
The 90th day after the record is filed.		
February 25 2016		
Dated,		
Sand Fat Jou		
Signature of a metaber or authorized representative	ve of a member	
Saeed Fatenejad		
Typed or printed name of signee		<del></del>

Page 3 of 3

Filing Fee: \$25.00