

L14000165967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

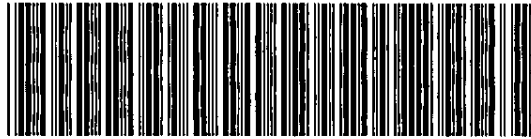
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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K. SALLY
EXAMINER
JAN 15

COVER LETTER

**TO: Registration Section
Division of Corporations
WP&RS Enterprises, 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:

David I. Reader

Name of Person

WP&RS Enterprises, LLC

Firm/Company

1451 Global Court

Address

Sarasota, Florida 34240

City/State and Zip Code

david.reader@altmed.co

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David I. Reader

941 702-9963

at (_____) _____

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

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WP&RS Enterprises, 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 10/23/2014 and assigned Florida document number L14000165967.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Alternative Medical Enterprises 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 _____
City Zip Code

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Dan Raymond	5050 1st Ave S., Suite 102	<input checked="" type="checkbox"/> Add
		Seattle, Washington 98134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gary Merlino	5050 1st Ave S., Suite 102	<input checked="" type="checkbox"/> Add
		Seattle, Washington 98134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mark Miller	8216 Championship Court	<input checked="" type="checkbox"/> Add
		Lakewood Ranch, Florida 34202	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Raju Lakhwani	6935 LaCantera Circle	<input type="checkbox"/> Add
		Lakewood Ranch, Florida 34202	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

Change
 Add
 Remove
 Change

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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>	<u>Type of Action</u>
MGR	Valerie Riddle	185 Tara Woods Drive	<input type="checkbox"/> Add
		Bumpass, Virginia 23024	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	John Cannon	6710 Professional Parkway West	<input type="checkbox"/> Add
		Suite 100	<input checked="" type="checkbox"/> Remove
		Lakewood Ranch, Florida 34240	<input type="checkbox"/> Change
MGR	Todd Marcotte	45 Spencer, Suite 101	<input type="checkbox"/> Add
		Ottawa, Ontario Canada K1Y2P5	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ron Watson	3738 Mundon Way	<input type="checkbox"/> Add
		Tallahassee, Florida 32309	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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TALLAHASSEE, FLORIDA

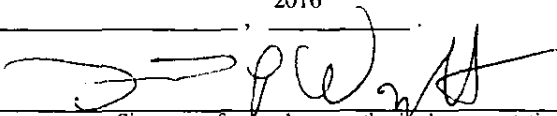
E. Effective date, if other than the date of filing: _____ (optional)

(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.

Dated January 4, 2016



Signature of a member or authorized representative of a member

David P. Wright

Typed or printed name of signee