L19000 179 269

(Re	equestor's Name)	
(Ad	ldress)	
,	,	
		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
	_	
Special Instructions to	Filing Officer:	
		

Office Use Only



200331914932

07/23/13---01011--001 *+25.00

2019 JUL 29 PM 2:31 SECHLISH JOT STATE

O Kuis.

COVER LETTER

TO:	Registration Sec Division of Corp			
C1:D102	MEDCORE	USA LLC		
SUBJEA	CT:	Name of Lim	ited Liability Company	
The encl	osed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		MIRIT ZELLER		
		ORB CPA PA	Name of Person	
		1000 SOUTH STATE RD	Firm/Company 7	
		PLANTATION, FL 33317	Address	
		MIRIT@ORBCPA.COM	City/State and Zip Code	
		E-mail address: ()	to be used for future annual report notif	ication)
For furth	er information co	oncerning this matter, please co	all:	
MIRIT			954 362-7720 at ()	
	Name of	f Person		Telephone Number
Enclosed	l is a check for th	e 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:

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

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

MEDCORE USA LLC. (Name of the Limited Limitity C	Company as it now appears on ou	ir records.)		
(A Florida Lu	mited Liability Company)			
The Articles of Organization for this Limited Liability Correlated document number $\frac{L19000179269}{L19000179269}$.	npany were filed on 07/11/201	19	_ and as	ssigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company here:			
The new name must be distinguishable and contain the words "Limited	i Liability Company," the designati	ion "LLC" or the abbrev	iation "I	L.C."
Enter new principal offices address, if applicable:		<u>v</u>	2019	
Principal office address MUST BE A STREET ADDRES	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	TAL	-	49-2-14
		<u></u>	=	
		AHA'S	29	č č
Enter new mailing address, if applicable:		(7) r [7] -	PΗ	
(Mailing address MAY BE A POST OFFICE BOX)		<u>ि</u> सः	2:	لهييهآ
		(<u> </u>	
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		records, enter the	: name	of the
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida stre	vet address		
		, Florida		
	City	;	Zip Code	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with t 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 removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u> SVITLANA GULKO	Address 1000 SOUTH STATE RD 7	Type of Action
AMBR			
		PLANTATION, FL 33317	□ Remove
			☐ Change
			☐ Remove
			Change
			☐ Change
			
			☐ Remove
			Change
			□ Remove
			□ Change
			□ Add
			☐ Remove
			Change

			•		-	
	<u> </u>					
	- -				· · · · · · ·	
	. 			"		

					-	
		_ .				
						
	- .	· -				
					•	
Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the D	ock does not mee	t the applicable	late of filing or more e statutory filing (than 90 days after equirements, this	nal) filing.) Pursuant to 605. date will not be liste	.0207 rd as
ne record specifies a delayed The 90th day after the rec		e, but not a	n effective tin	ne, at 12:01 a	.m. on the earlie	er of
Dated		2019				
	A					
	Signature of a more	nher or putheries	ed representative of	a member		
	Signature of a men	nber or authoriz	ed representative of	a member		

Page 3 of 3

Filing Fee: \$25.00