

L20 000097070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

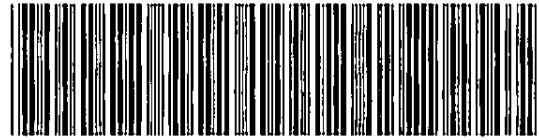
(Business Entity Name)

(Document Number)

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FILING OFFICE

16

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

VI2 HEALTH 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 04/06/2020 and assigned Florida document number L20000097070.

This amendment is submitted to amend the following:

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

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)

2020 JUL 30 AM 9:56

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>
EVP	Kenneth Kelliher	33 SW 2nd Ave	<input type="checkbox"/> Add
		PH2	<input checked="" type="checkbox"/> Remove
		Miami FL 33130	<input type="checkbox"/> Change
EVP	Mike Ferris	33 SW 2nd Ave	<input type="checkbox"/> Add
		PH2	<input checked="" type="checkbox"/> Remove
		Miami FL 33130	<input type="checkbox"/> Change
VP	Barbara Beoto	33 SW 2nd Ave	<input checked="" type="checkbox"/> Add
		PH2	<input type="checkbox"/> Remove
		Miami, FL 33130	<input type="checkbox"/> Change
MGR	Monique Hewitt	33 SW 2nd Ave	<input type="checkbox"/> Add
		PH 2	<input type="checkbox"/> Remove
		Miami FL 33130	<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

2018 JUL 30 AM 9:56
 ALL INFORMATION CONTAINED
 HEREIN IS UNCLASSIFIED

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

Multiple horizontal lines for amending information.

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E. Effective date, if other than the date of filing: June 1, 2021 (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 June 25 2021

Signature of a member or authorized representative of a member

Tarek Kirschen, CEO

Typed or printed name of signee