

8/3/23, 4:51 PM

Division of Corporations

Florida Department of State
Division of Corporations
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((H23000270645 3)))



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Division of Corporations
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Account Name : INTERSTATE FILINGS LLC
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ELEVATE HOME HEALTH GROUP HOLDINGS OF FLORIDA LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2023 AUG -4 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AUG 05 2023

Brumbley

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ELEVATE HOME HEALTH GROUP HOLDINGS OF FLORIDA 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 08/23/2021 and assigned Florida document number 1.21600376949.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

600 Rinehart Road, Suite #2116

Lake Mary, Florida 32746

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:

INTERSTATE AGENT SERVICES, LLC

New Registered Office Address:

100 SE 2ND STREET, SUITE 2000 #200

Enter Florida street address

MIAMI

City

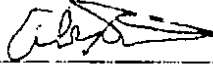
Florida

33133

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

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AND
FILED
2023 AUG -4 PM 2:41
CLERK OF COURT
MIAMI-DADE COUNTY
FLORIDA

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 (((H23000270645 3)))
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SCHWARTZ, STEVEN	600 RINEHART ROAD SUITE 2116	☐ Add
		LAKE MARY, FL 32746	☒ Remove
			☐ Change
MGR	KOHN, GREGORY E	600 RINEHART ROAD SUITE 2116	☐ Add
		LAKE MARY, FL 32746	☒ Remove
			☐ Change
MGR	PPG Elevate LLC	600 Rinehart Road, Suite #2116	☒ Add
		Lake Mary, Florida 32746	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

