

L070000010336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

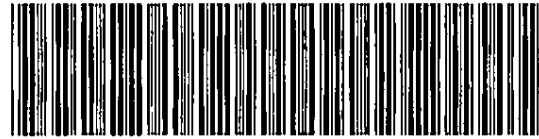
(Business Entity Name)

(Document Number)

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04/22/21--01010--019 **60.00

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2021 APR 22 PM 1:27
CLERK OF COURT
JULIA A. BEEBE, JR.

UK
6/17/21

TO: Registration Section
Division of Corporations

Southeast Veterinary Referral Center 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:

Miguel A Cervoni

Name of Person

Firm/Company

1426 Siena Avenue

Address

Coral Gables, FL 33146

City/State and Zip Code

migcer@bellsouth.net

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

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2021 APR 22 PM 1:27
TALLAHASSEE, FL

For further information concerning this matter, please call:

Miguel A Cervoni

305 790-9746

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**TO
ARTICLES OF ORGANIZATION
OF**

Southeast Veterinary Referral Center I.L.C.

(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 01/26/2007 and assigned
Florida document number L07000010336

This amendment is submitted to amend the following:

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

SVRC Investments 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)

1426 Siena Avenue

Coral Gables, FL 33146

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1426 Siena Avenue

Coral Gables, FL 33146

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: Miguel A Cervoni

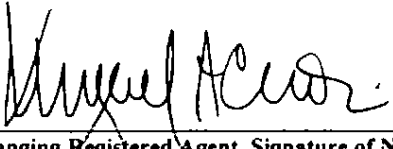
New Registered Office Address:

Enter Florida street address

City, Florida 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

FILED
2021 APR 22 PM 1:28
CLERK OF DISTRICT COURT
JULIA A. STANLEY

FILED
2021 APR 22 PM 1:28
CLERK OF DISTRICT COURT
JULIA A. HARRIS

04/20/2021

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.

Dated April 17, 2021

Signature of a member or authorized agent

Signature of a member or authorized representative of a member

Miguel A. Cervoni
Typed or printed name of s

Typed or printed name of signee