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Office Use Only



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APR 20 2020 M. SOLOMON

COVER LETTER

	Registration Sc Division of Cor			
SUBJEC	r. (CO MPREHENSIVE	SINE CENTER ted Liability Company	e UC
37,301.0		Name of Limi	ted Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please retu	ırn all correspo	ondence concerning this matter	to the following:	
		RA	JEEN PANDIT	·
			Name of Person	
		SPIRE	Gfruf \N C Firm/Company	
			Firm/Company	
		6847 N	W 107 TERRAC	E
		1 mil am	City/State and Zip Code	
			o be used for future annual report no	
For furthe	r information c	oncerning this matter, please ca	ill:	
\overline{A}	RAJEEN	PANDIT		· -1 (-) -)
	1	t Person	at (721) Area Code Daytii	me Telephone Number
Enclosed i	is a check for th	he following amount:		
□ \$25.0	0 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)
	dailing Addres		Street Address: Registration S	ection
	Division of C		Division of Co	
	P.O. Box 632	· · · · ·	The Centre of	-
Ţ	lallahassee, l	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COHPREHEN (Name of the Limited	SWE S	PINE 1	CENTER	· U	<u> </u>	2028 APR 17	_
						APR	· .
The Articles of Organization for this Limited Lial Florida document number	<u> </u>	vere filed on	5 1	2007	and assistance of the control of the	gned AH 9: 5	
A. If amending name, enter the new name of t	_	ity company	here:		7. a. 1.19	_	
The new name must be distinguishable and contain the wor	ds "Limited Liabili						
Enter new principal offices address, if applical (Principal office address MUST BE A STREET		PLA	10 NC	17 L	- 33	318	中 :
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B.	<u>0X)</u>	PLAN	0 BO UTATION	X 170	147 33	318	
B. If amending the registered agent and/or regagent and/or the new registered office address	•	idress on ou	r records, <u>ent</u>	er the name	of the new	registered	<u>i</u>
Name of New Registered Agent:		LIAN	CAME	RON			
New Registered Office Address:	7710		Torida street ada		T 7	1 205	_
	TAHARA	Ciny	<u> </u>	Florida	333 2	21	

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

MGR = Manager

AMBR = Authorized Member

or removed from our records:

<u>Title</u>	Name	Address	Type of Action
			□Remove
			□Change
	 		□Add
			□Remove
			□Change
			□Add
			□Remove ➤
			☐ Change
			TAR John STATE OF THE PROPERTY
			□Remove
			Change
			🗆 Add
			Remove
			Change
			□ Add
			□Remove
			□Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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2020 APR		APR	
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		_	
E. Effective date, if other than the date of filing:)7 (3)(b is the	05.020' isted as	e prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 applicable statutory filing requirements, this date will not be listed
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.	e	fter the	etive time, at 12:01 a.m. on the earlier of: (b) The 90th day after
Dated 4 13 20			<u></u> ·
BO M			
Signature of a member or authorized representative of a member			or authorized representative of a member
Typed or printed name of signee			

Filing Fee: \$25.00



April 6, 2020

RAJEEV PANDIT SPIRE GROUP INC 6847 NW 107 TERRACE PARKLAND, FL 33076

SUBJECT: COMPREHENSIVE SPINE CENTER, PLLC

Ref. Number: L07000053360

We have received your document for COMPREHENSIVE SPINE CENTER, PLLC. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Correction can only be filed within 30 days of the initial file date with our office. Your company was created in 2007, therefore you will need to file an "amendment" form, form is enclosed. Please return with a copy of this letter. No additional money is needed.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon Regulatory Specialist II Supervisor

Letter Number: 720A00007356

RECEIVED
APR 1 7 2020