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SECRETARY OF STATE
TALLAHASSEE, FL

32 HAY 12 AH 9:

COVER LETTER

	Registration Se Division of Cor			
éta ire				
NORTEC	1:	Name of Lim	ited Liability Company	
The enclo	Wellquest Lifestyle Rehabilitation LLC Name of Limited Liability Company closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: Terry L Beavers Name of Person Firm/Company 110 Mitchell Dr Address Brandon FL 33511 City/State and Zip Code tbeavers51@hotmail.com E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call:			
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		Terry L Beavers		
			Name of Person	
			Firm/Company	
		110 Mitchell Dr		
			Address	
		Brandon FL 33511		
		tbcavers51@hotmail.com	City/State and Zip Code	
		•	to be used for future annual report no	otification)
For further	er information c	concerning this matter, please c	all:	
Terry Bea	avers			
	Name o	of Person	Area Code Dayti	me Telephone Number
Enclosed	is a check for th	he following amount:		
□ \$25.0	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 Addres Registration S		Street Address: Registration S	ection
I	Division of C	Corporations	Division of Co	orporations
	P.O. Box 632	27	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Wellquest Lifestyle Rehabiltation LLC

FILED DEMAY 12 AM 9: 3; (Name of the Limited Liability Company as it now appears on our record

(A Florid	la Limited Liability Company)	SECRETARY OF STATE
(A Florid The Articles of Organization for this Limited Liability C	Company were filed on Februa	ry 6, 2011 ALLAHASSEE FIRE
Florida document number L09000113645	<u></u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
Be Well Acupunture & Bodyworks LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:	<u>. </u>	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		rds, <u>enter the name of the new registe</u>
ingent and of the new ognotered entre and the state of		
Name of New Registered Agent:	· · ·	
New Registered Office Address:		
	Enter Florida	street address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registere	ed 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>	Address	Type of Action
			□Remove
			Change
			□Add
			□ Remove
			□ Change
			Change
			□Add
			□Remove
			□Change
			bbA□
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			□Remove
			Change

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ective date, if other than the effective date is listed, the date muse: If the date inserted in this blument's effective date on the D	date of filing: st be specific and cannot be prior to date ock does not meet the applicable contributed of State's records.	(opti te of filing or more than 90 days afte statutory filing requirements, th	onal) r filing.) Pursuant to 605.020 is date will not be listed a
	.,		
cord specifies a delayed effectiv	ve date, but not an effective (ime, a	at 12:01 a.m. on the earlier of: (I	o) The 90th day after the
cord specifies a delayed effectiv filed.		at 12:01 a.m. on the earlier of: (I	o) The 90th day after the
cord specifies a delayed effectiv filed. cd May 9	, 2022		
cord specifies a delayed effectiv filed. cd May 9			