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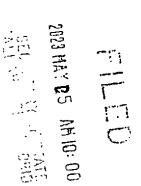
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## COVER LETTER

		PLLC			
Division of Corporations  SUBJECT: VICTOR LOPEZ DE MENDOZA, M.D., PLLC  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:  VICTOR LOPEZ DE MENDOZA  Name of Person  Firmv/Company  3661 SOUTH MIAMI AVENUE, SUITE 901  Address  MIAMI, FL 33133  City/State and Zip Code  kidney1970@gmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Dayren L. Suarez  Name of Person  The following amount:  Enclosed is a check for the following amount:  S25.00 Filing Fee  Certificate of Status  Certificate of Status Certificate Copy is enclosed)  Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Copy is enclosed)					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	VICTOR LOPEZ DE MEI	NDOZA			
		Name of Person			
		Firm/Company			
	3661 SOUTH MIAMI AV	ENUE, SUITE 901			
		Address			
	MIAMI, FL 33133				
		City/State and Zip Code			
			(C)		
For further information of		•	incation)		
Dayren L. Suarez					
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status &		
Registration	Section	Registration Se			
P.O. Box 632	27	The Centre of			
Tallahassee,	rl 32314	Z413 IN. MIORIO	oc sireet, suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VICTOR LOPEZ DE MENDOZA, M.D., PLL	LC	
(Name of the Limited Liability (A Florida I	Company as it now appears on our records. Limited Liability Company)	)
The Articles of Organization for this Limited Liability Co	ompany were filed on06/04/2010	and assigned
Florida document number L10000060258		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ted 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 ADDRI	ESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		2022 F
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter t	he name of the new registere
		A DE C
Name of New Registered Agent:		- 8 -
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
	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

Title	<u>Name</u>	Address	Type of Action
AMBR	KATIA LOPEZ DE MENDOZA	3661 SOUTH MIAMI AVENUE, SUITE 901	🗎 Add
		MIAMI, FL 33133	[]Remove
			□Change
			□Adđ
			□Remove
			[] Change
			🗆 Add
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			Change
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			Change
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			∏ Change

If amending any other informati	on, enter change(s)	here: (Attach a	dditional sheets, if	necessary.)	
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Effective date, if other than the offertive date is listed, the date must <b>Note:</b> If the date inserted in this bloodocument's effective date on the Department.	ck does not meet the a	applicable statutor	g or more than 90 day y filing requirement	(optional) s after filing.) Pursuant to s, this date will not be	605.0207 listed as
e record specifies a delayed effective rd is filed.	date, but not an effec	tive time, at 12:01	a.m. on the earlier	of: (b) The 90th day	after the
Dated February 96	2023				
	ignature of a member of	r authorized represen	ntative of a member		-
VICTOR LOPEZ DE ME	NDOZA				
TOTOK LOUG DE ME		r printed name of sig	ence		-

Filing Fee: \$25.00