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COVER LETTER

TO: Registration Sec Division of Corp			
Rx of Boo	a, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	William B. Earl		
		Name of Person	
	Rx of Boca, LLC		
		Firm/Company	
	23431 Water Circle		
		Address	
	Boca Raton, FL 334	86	
		City/State and Zip Code	
	brettearl4@gmail.com	To be used for future annual report notif	
For further information con		•	cation)
	ncerning this matter, please c		
William B. Earl		714 785-9836	
Name of I	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	-		
■ \$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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hx of Boca, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L10000070578	were filed on July 2, 2010	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the abl	previation "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) B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ne name of the new
Name of New Registered Agent:		\$33
New Registered Office Address:		15 F
	Enter Florida street address, Florida	EB 26
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	5	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, and I am fai provided for in Chapter 605, F.S. Or, if	niliar with and this document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Carol Santana Earl	23431 Water Circle	Add
		Boca Raton, FL 33486	□ Remove
MGR	William B. Earl IV	23431 Water Circle	Add
		Boca Raton, FL 33486	Remove
MGR	Nicole Jeanne Santana GuiNN	23431 Water Circle	Add
		Boca Raton, FL 33486	Remove
			Add 15 Remote 25 25 25 26 27 26 27 27 27 27 27 27 27
			Add:
			Add Remove

lf amending any other informat	tion, enter change(s) here: (Attach ad	ditional sheets, if necessary.)
		***** ***. **
Effective date, if other than the (The effective date must be specific, cannot the date this document is filed by the Flo	date of filing: the prior to date of receipt or filed date and can brida Department of State)	not be more than 90 days after
Dated Feb. 23	2015	
	Signature of a member or authorized represents	2 III.
William B. Earl III		
	Typed or printed name of signe	ee

Page 3 of 3

Filing Fee: \$25.00

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