

2110000 75541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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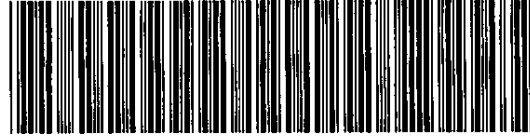
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

AUG 04 2016
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RODGERS and RICHER, LLC

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:

JOHN J. RODGERS

Name of Person

RODGERS and RICHER, LLC

Firm/Company

1102 N. Main St.

Address

Wildwood, FL 34785

City/State and Zip Code

drjodurodgers@yahoo.com

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

For further information concerning this matter, please call:

JOHN J. RODGERS

352 201-7900
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

RODGERS and RICHER, LLC

(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 06/29/2011 and assigned Florida document number L11000075541.

This amendment is submitted to amend the following:

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

CANADIAN MEDS OF WILDWOOD, 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)

1102 N. Main St.

Wildwood, FL 34785

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1102 N. Main St.

Wildwood, FL 34785

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:

JOHN J. RODGERS

New Registered Office Address:

1102 N. Main St.

Enter Florida street address

Wildwood

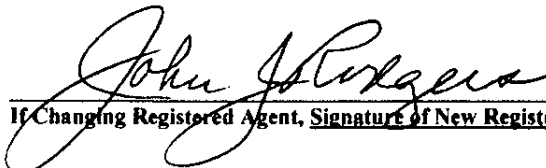
City

Florida 34785

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.


John J. Rodgers

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>	<u>Address</u>	<u>Type of Action</u>
MGR	JOHN J. RODGERS	1102 N. Main St.	<input checked="" type="checkbox"/> Add
		Wildwood, FL 34785	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	IRIS D. RODGERS	1102 N. Main St.	<input checked="" type="checkbox"/> Add
		Wildwood, FL 34785	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CHARLES J. RICHER	3850 E. Gulf to Lake Hwy.	<input type="checkbox"/> Add
		Inverness, FL 34453	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

STATE OF FLORIDA
TALLAHASSEE, FLORIDA
AUG 1 PM 12:18
CLERK OF COURT

16 AUG - 1 PM 12:10
TALLAHASSEE, FLORIDA


16 AUG - 1 PM 12:10
TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

Dated July 14, 2016


Signature of a member or authorized representative of the union

Signature of a member or authorized representative of a member

JOHN J. RODGERS

Typed or printed name of signee