L19000199754

Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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UWH, PLLC

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

UWH, PLLC

(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 08/30/2011 and assigned Florida document number L11000099754.

This amendment is submitted to amend the following:

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

_____

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)

_____
_____
_____

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

_____
_____
_____

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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: _____

New Registered Office Address: _____
Enter Florida street address

_____, **Florida** _____
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

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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	Name	Address	Type of Action
MGR	WINNIE SOUFI, MD	1501 YAMATO RD STE 200 W	☐ Add
		BOCA RATON, FL 33431	☒ Remove
			☐ Change
MGR	MICHELLE HORVATH, MD	1501 YAMATO RD STE 200 W	☐ Add
		BOCA RATON, FL 33431	☒ Remove
			☐ Change
MGR	STEVEN A SUBA, MD	1501 YAMATO RD STE 200 W	☒ Add
		BOCA RATON, FL 33431	☐ Remove
			☐ Change
MGR	ANDREW SHIMMER, MD	1501 YAMATO RD STE 200 W	☒ Add
		BOCA RATON, FL 33431	☐ Remove
			☐ Change
MGR	MITCHELL NUDELMAN, MD	1501 YAMATO RD STE 200 W	☒ Add
		BOCA RATON, FL 33431	☐ Remove
			☐ Change
MGR	MICHAEL MALLORY, MD	1501 YAMATO RD STE 200 W	☒ Add
		BOCA RATON, FL 33431	☐ Remove
			☐ Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. **Effective date, if other than the date of filing:** _____ **(optional)**

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 6/27/2019

DocuSigned by
Dr. Michael Mallory
C06A7B0D0C4E...

Signature of a member or authorized representative of a member

Dr. Michael Mallory

Typed or printed name of signer

Filing Fee: $25.00