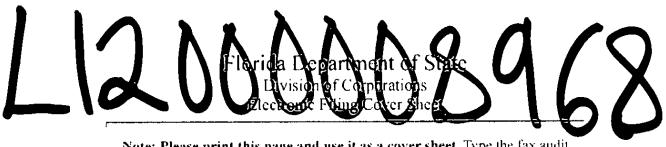
Page: 2 of 5



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M. SOLOMOH

ALEXACINED ALEMAN 31 PM 1:

ARTICLES OF AMENDMENT

Page: 3 of 5

company has been notified in writing of this change.

TO ARTICLES OF ORGANIZATION

Shur Smart Health Resources, 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 January 19, 2012 and assigned L12000008968 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Smart Health Resources, LLC The new name must be distinguishable and contain the words, "Limited Liability Company," the designation "L.I.C." or the abbreviation "L.I.C." 1694 Persimmon Drive Enter new principal offices address, if applicable: Naples, Florida 34109 (Principal office address MUST BE A STREET ADDRESS 1694 Persimmon Drive Enter new mailing address, if applicable: Naples, Florida 34109 (Mailing address MAY BE A POST OFFICE BOX) 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 Zip Code Cin 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

If Changing Registered Agent, Signature of New Registered Agent

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

□Change

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To: 18506176383

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If amending Authorized Person(s) authorized to manage,	enter the title, name, and address of ca	ch person being added
in amenoral requirement and a property and an arrangement of the same and a		
or removed from our records:		

<u>Title</u>	<u>Name</u>		Address	Type of Actio
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March 30	2021	· A		
- Spi	Signature of a member or authori	ved representative of a member		
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