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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Interhealth, 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:	
Edgar Belaval JR Name of Person	
Belaval Law LLC	
Delray Beach, Fl 33444  City/State and Zip Code	
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	
Edgar Belaval at 305, 389-2882  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
S25.00 Filing Fee Scrifficate of Status Certified Copy (additional copy is enclosed)  S25.00 Filing Fee Scrifficate 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

# ARTICLES OF ORGANIZATION

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Tatal	realth, L	1		
·	bility Company as it now appe	=		
(A Par	nda Cimiled Ciability Company	1		
The Articles of Organization for this Limited Liability	Company were filed on _	04 30 / 12	and assigned	
Florida document number L 12 0000 57	<u>-288</u>			
This amendment is submitted to amend the following	:			
A. If amending name, enter the new name of the li	imited liability company	here:		
The new name must be distinguishable and contain the words "I	imited Liability Company," the	designation "LLC" o	r the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	_			
(Principal office address MUST BE A STREET AD	DRESS)			
		<del></del>		
F-4				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<del></del>			
Manually duaress MAT BE A POST OFFICE BOX)	***************************************			
			7 7	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address (	on our records, g	enter the name of the n	ew
registered agent and of the new registered office a	uui ess uere.			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter F	lorida street address		
<u> </u>		, Flori		ì
New Registered Agent's Signature, if changing Registe	City		Zip Code	
		n namaaitu. I fuuth	an aguar ta aguarb, with t	4
I hereby accept the appointment as registered age provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chang	l complete performance of agent as provided for in ered office address, I her	of my duties, and . Chapter 605, F.S	I am familiar with and S. Or, if this document is	ne

If Changing Registered Agent, Signature of New Registered Agent

	Authorized Person(s) authorized to man from our records:	age, enter the title, name, and address of each	person being added
MGR = M: AMBR = A:	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Belowal Law Firm, PA	101 NE 21 Avenue	☐ Add
		Ste 200	Remove
		Delray Beach, Fl 33444	☐ Change
MGR	Belaval Law, L.L.C.	101 NE 2 rd Avenue	<b>Š</b> X Add
		Ste 200	Remove
		Debay Beach, Fl 3344	☐ Change
			O Add
			Remove
		£	DAdd
			- Remove
			□ Change
<del></del>			🛘 Add
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			D Add
			□ Remove
			T Change

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary		
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(If an effec	e date, if other than the date of filing: (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date	(T) Pursuan will not	to 605.0207 (3 be listed as th
docume	nt's effective date on the Department of State's records.		
	rd specifies a delayed effective date, but not an effective time, at $12:01~a.m.\ 0$ 0th day after the record is filed.	on the	earlier of:
Dated _	October 26 2017		
	Signature of a member or authorized representative of a member		1
	EXCAR BELAVAL		1

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Filing Fee: \$25.00