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	(Requestor's Name)
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PICK-UF	WAIT MAIL
	(Business Entity Name)
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Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:





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SECRETARY OF STATE
TALLAHASSEE, FLORIO,



June 6, 2016

JOHN SARNO 4600 MILITARY TRAIL STE 114 JUPITER, FL 33458

SUBJECT: SF & D LLC Ref. Number: L12000119831

We have received your document for SF & D LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 816A00011825

Justin M Shivers Regulatory Specialist III Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO:	Registration Section Of Corp.	ction porations	• • •	
end H	SF & D LL	C		
SUBJ	CCT1	Name of Limi	ited Liability Company	and the second s
The cr	nclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		rporations		
			Name of Person	ng daliliyaya manayda ayana qayili 1904 daliliydi birani dalilada ira mandaybi
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			·	ication)
For fu	rther information c	oncerning this matter, please ea	all:	
John S	Sarno		561 557-4159	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclo	sed is a check for th	he following amount:		
■ S2	25.00 Filing Fee		Certified Copy	Certificate of Status & - Certified Copy

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

Sarno's Dentistry & Lab 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 $\frac{09\cdot19/2012}{1}$ and assigned Florida document number <u>1.12000119831</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CHEELLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 4600 Military Trail Ste 114 Enter new principal offices address, if applicable: Jupiter, FL 33458 (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 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 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

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>	Address	Type of Action
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