Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone

: (323)962-8600 Fax Number : (323) 962-3889

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CORNERSTONE LIFECARE, LLC

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JUL - 3 2013 J. BRYAN

FAX COVER	RSHEET	
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COMPANY		150 By
FAX NUMBER	18506176383	70 A
FROM	Tony Burroughs	927
DATE	2013-07-02 08:30:24 PDT	9
RE	FL SOS - LZ Order 506846157	

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COVER LETTER

COVER LETTER	
TO: Registration Section Division of Corporations	ASSES WILL
SUBJECT: CORNERSTONE LIFECARE, LLC (Name of Limited Liability Company)	MISJUL 2 M 8.21 SECRETARISHED
The enclosed Articles of Amendment and fee(s) are submitted for filing.	1000 P
Please return all correspondence concerning this matter to the following:	
Imelda Vasquez	
(Name of Person)	
Legalzoom.com, Inc.	
(Firm/Company)	
100 W. Broadway Suite 100	
(Address)	
Glendale, CA 91210	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Imelda Vasquez at (323) 962-8600 ext 7950 (Area Code & Daytime Telephone Number)	_
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \times \text{\$30.00 Filing Fee & }\ \times \text{\$25.00 Filing Fee & }\ \text{\$25.00 Filing Fee & }\ \text{\$Certificate of Status} \tex	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

TO:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 Lia Florida document number <u>L13000010754</u>	bility Company were filed on 01/22/2013	and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the design	mation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered off		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida	street address)
	, Fk	orida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

CORNERSTONE LIFECARE, LLC

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 608, 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)

MGR = Manager

MGRM = Managing Member

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

GRM = N	ianaging Member		
<u>e</u>	Name	Address	Add Remove
		Ž.	JO Add
			Remove
			-33/2 1/2
			Remove 7
	·		- 756
			Add
			Remove
			Add Remove
			_
			Add Remove
			Add
			Remove
			
lf amend	ing any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
Ar	icle V.		
Th	e managers DAVID A FITTS and I	OONALD E FITTS shall assume	
the	title: MANAGING MEMBER (MGF	RM)	
			-
			_
			
ted	6/20 ,2017	3	
	Donald S	Ella	
	Signature of a member of	or authorized representative of a member	·
		Donald E. Fitts	
	Typed o	r printed name of signee	

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Filing Fee: \$25.00