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STATE OF CALIFORNIA
SANTA ANA COUNTY

501 101

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 853155 8346759

AUTHORIZATION :

COST LIMIT :  \$25,000

ORDER DATE : June 10, 2021

ORDER TIME : 9:23 AM

ORDER NO. : 853155-250

CUSTOMER NO: 8346759

DOMESTIC AMENDMENT FILING

NAME: PSG OF SARASOTA, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER'S INITIALS: _____

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Ronald McFarlane	5315 Avion Park Drive, Ste 120	<input checked="" type="checkbox"/> Add
		Tampa, FL 33607	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Zev Scherl	5315 Avion Park Drive, Ste 120	<input checked="" type="checkbox"/> Add
		Tampa, FL 33607	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Victoria Starr	5315 Avion Park Drive, Ste 120	<input checked="" type="checkbox"/> Add
		Tampa, FL 33607	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jeff Azevedo	2430 Camino Ramon, Suite 120	<input type="checkbox"/> Add
		San Ramon, CA 94583	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Kati Gainous	2430 Camino Ramon, Suite 120	<input type="checkbox"/> Add
		San Ramon, CA 94583	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
Authorized Person	Ryan Boriskin	2430 Camino Ramon, Suite 120	<input type="checkbox"/> Add
		San Ramon, CA 94583	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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.

Dated June 16, 2021

Ronald McFarlane

Signature of a member or authorized representative of a member

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Ronald McFarlane

Typed or printed name of signee

Filing Fee: \$25.00