

L140000046891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED

14 APR -8 AM 10:07
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

APR 10 2014

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Callingmed, 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:

Reid Shapiro

Name of Person

Callingmed, LLC

Firm/Company

1451 W Cypress Creek Road, Suite 300

Address

Fort Lauderdale, FL 33309

City/State and Zip Code

ari.wirtschaftler@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ari Wirtschaftler

Name of Person

at (561) 414-1639

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$60.00 Filing Fee,
Certificate 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

April 5th, 2014
1451 W Cypress Creek Road
Suite 300
Fort Lauderdale, FL 33309

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

To whom it may concern,

I made a typo during the registration of my company CallingMed, LLC (L14000046891). I accidentally put in the state California as opposed to Florida. The rest of the information remains unchanged. Included in this packet are the completed Amendment Form and a printed copy of the two emails that I received from sunbiz.org that pertain to this filing.

I have also included a check for \$60.

If you have any additional questions, please contact me on my cell (561)414-1639.

Thanks in advance.

Sincerely,



Ari Wirtschafter
ari.wirtschafter@gmail.com

TO
ARTICLES OF ORGANIZATION
OF

Callingmed, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
14 APR -8 AM 10:07
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on March 20th, 2014 and assigned
Florida document number 000258041470 - confirmation / L14000046891
number

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1451 W. Cypress Creek Road

Suite 300

Fort Lauderdale, FL 33309

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1451 W. Cypress Creek Road

Suite 300

Fort Lauderdale, FL 33309

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

, Florida

City

Zip Code

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

Authorized Member 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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

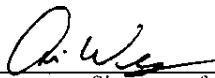
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 5th, 2014.



Signature of a member or authorized representative of a member

Ari Wirschafter

Typed or printed name of signee