L14000056007

(Req	uestor's Name)	
(Addi	ress)	
(Addi	ress)	
(City/	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nai	me)
(Doc	ument Number))
Certified Copies	Certificate:	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



500355842885

12/17/20--01013--016 **25.00

2020 DEC 17 PM 2: 37



Mailing Address:

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

(A Florida Limited	Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document numberL_\400056007	were filed on	4-10+12014	_ and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab		<u>ere</u> :		
Pradina optometry	, LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the	designation "LLC" or the abbr	eviation "L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		SECTION	71	
Enter new mailing address, if applicable:			7 7	
(Mailing address MAY BE A POST OFFICE BOX)		19.50 27.50	23	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our i	records, <u>enter the name</u>	of the new regis	
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 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Ac
AMBR	Denyse Damesar	210 North Habana	KAdd
		Tampa, FL 3360a	□Remove
			🗆 Change
			□Add
			□Remove
			□Change
			2020 計
		· ——	- Remove
			7020 DEC 17 PN 2:37
	ं ति	□ Add	
		□Remove	
			□ Change
<u>.</u>			□Add
		 ,	□Remove
		□ Change	
			□Add
			□Remove
			☐ Change

		,,,,	···			
	<u> </u>					
						
- 						
			 -		.	
						
				-1())	2020	
			· · · · · · · · · · · · · · · · · · ·	_도봇	-	- 7
				7. S	P	
				<u> 변상</u>	5	"
					- 37	
						
ffective date, if other than t an effective date is listed, the date r lote: If the date inserted in this ocument's effective date on the	s block does not meet the a ge Department of State's rec	pplicable statutory fili ords.	ng requirements.	this date	will no	t be list
record specifies a delayed effec Lis filed.	rive date, but not an effecti	ive time, at 12:01 a.m	on the earlier of:	(b) Th	ie 90th (lay afte
ment it of Decen	mber 20	30.				

ETT E MAS ON