

L14 000067944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

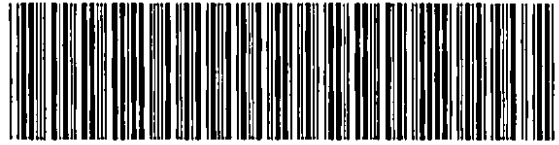
(Document Number)

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2019 JUN -7 PM 1:37

FILED

Amend/cus

JUN 22 2019  
I ALBRITTON

## COVER LETTER

TO: Registration Section,  
Division of Corporations

SUBJECT: INTERVENTIONS RECOVERY TREATMENT CENTER, 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:

MENDI RIGGINS

Name of Person

INTERVENTIONS RECOVERY TREATMENT CENTER, LLC

Firm/Company

1800 SE 3RD AVENUE

Address

FORT LAUDERDALE, FL 33316

City/State and Zip Code

MENDIR@SIGNATUREHEALTHSG.COM

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

For further information concerning this matter, please call:

MENDI RIGGINS

754 216-3338  
at ( )

Name of Person

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

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

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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>
MGR	PAUL SOHR		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1800 SE 3RD AVENUE FORT LAUDERDALE, FL 33316	<input checked="" type="checkbox"/> Change
MGR	STERLING KEVIN YATES	410 EVERNIA STREET, #727 WEST PALM BEACH, FL 33401	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CFO	PAUL SOHR		<input type="checkbox"/> Add
		1800 SE 3RD AVENUE FORT LAUDERDALE, FL 33316	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

[illegible]

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member or author

Mendi V. Riggins

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**Filing Fee: \$25.00**