

L14000071450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

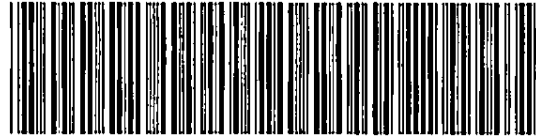
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Barri Shanc gave permission
to add Leading Medic LLC as
the name to be changed to

ST 3/16/21

Office Use Only



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03/18/21--01004--001 ++25.00

FILED
2021 MAR 15 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FL

ST 3/16/21

COVER LETTER

TO: Registration Section
Division of Corporations

FILED

SUBJECT: Shane Industries LLC
Name of Limited Liability Company

2020 MAR 15 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FL

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Barri Shane

Name of Person

Leading Medic LLC

Firm/Company

420 East 61 Street, 10E

Address

New York, NY 10065

City/State and Zip Code

barrishane@aol.com

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

For further information concerning this matter, please call:

Barri Shane

Name of Person

at (646)

Area Code

296 3832

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

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

FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2014 MAR 15 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FL

Shane Industries LLC

(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 Liability Company were filed on May 1, 2014 and assigned
Florida document number L14000071450.

This amendment is submitted to amend the following:

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

LEADING MEDIC LLC

The new name must be distinguishable and contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Rob Graham

New Registered Office Address:

111 2nd Ave NE Ste 210

Enter Florida street address

St. Petersburg

City

Florida

33701

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

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

[illegible]

[illegible]

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 3/12, 21

Bari Shane

Signature of a member or authorized representative of a member

Barri Shane

Typed or printed name of signee

Filing Fee: \$25.00