8/19/2015



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: ADVANCED RECOVERY SYSTEMS, LLC

Account Number : 120140000088

Phone

(754)300-3120

Fax Number

: (888)919-4431

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

URUJONE

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PBSRE, LLC

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	COVER LETTER		i e
TO: Registration Se Division of Cor	ction porations	·•	
PBSRE, LL SUBJECT:	С		
SUBJECT:	Name of Lamited Liability Company		
The enclosed Articles of a	Amendment and fee(s) are submitted for filing.		
Please return all correspon	ndence concerning this matter to the following:		
	Belina Surujon		
	Name of Person	•	
	Advanced Recovery Systems, LLC		
	Firm/Company	•	
	100 SE 3rd Avenue, Suite 1101		
	Address	,	
	Ft. Lauderdale, FL 33394		
	City/State and Zip Code	, 	
	Bsurujon@advancedrecoverysystems.com	SEC ALL	
	E-mail address: (to be used for future annual report notification)	AUG CRET	77
For further information co	oncerning this matter, please call:	SSA 2	
Belina Surujon	754 300-3120; Ext. 4000	0 A	TI
Name of		SIATE LORIBA	O
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fcc	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Fil	ling Fee.	

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Certified Copy (additional copy is enclosed) 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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PBSRE, LLC		
(Name of the Limited Liability Compa (A Florida Limited	inv as it now appears on our record Liability Company)	Ŧ.)
The Articles of Organization for this Limited Liability Company  Porida document number L14000097856	were filed on June 18, 2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
Labsense, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	100 SE 3rd Avenue	
Principal office address MUST BE A STREET ADDRESS)	Suite 1101	
	Ft. Lauderdale, FL 33394	
Enter new mailing address, if applicable:	100 SE 3rd Avenue	2015 SEC
Mailing address MAY BE A POST OFFICE BOX	Suite 1101	ARE SO
	Ft. Lauderdale, FL 33394	\$5 G
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		F(S)
		8: 21
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	s
		orida
	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

# 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

1 1

Title .	<u>Name</u>	Address	Type of Action
MGR	Mitchell Eisenberg	100 SE 3rd Avenue	
		Suite 1101	☐ Remove
		Ft. Lauderdale, FL 33394	■ Change
MGR Lewis Gold	Lewis Gold	100 SE 3rd Avenue	□ Add
		Suite 1101	☐ Remove
	Ft. Lauderdale, Ft. 33394	■ Change	
			□ Add
			Remove
		☐ Change	
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			Add
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			☐ Change

o: Page 5 of 5	2015-08-20 16:56:30 (GMT)	18889194431 From: Belina Surujo
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E. Effective date, if other than the	e date of filing:  st be specific and cannot be prior to date of filing or more than 90 da  lock does not meet the applicable statutory filing requirement	(optional)
document's effective date on the D		IG 2
(b) The 90th day after the rec	d effective date, but not an effective time, at 12 cord is filed.	2:01 a.m. prethe earlier M
Duted August 20, 2015		IBA
Metchell	Signature of a member or authorized representative of a member	natikunuse nauruna resigendadi Prila villa Prila, kannondatus ir kalinininin Prila
Mitchell Eisonberg, Ma	$\mathcal{O}$	

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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00