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## **COVER LETTER**

TO: Registration Se Division of Cor			
Registration Section Division of Corporations  SUBJECT:  CLARION CONFORT CARE, UC  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:  ROHAN E SHIM  Name of Person  CLARION CONFORT CARE, UC  Firm/Company  GOOL N. FAUS CIRCLE DE UNITYOU Address  LANDERAGUL, FL 33319  City/State and Zip Code  Clarion core of gmuil Com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  ROHAN E SMIM  Name of Person  at (954) 980-8241  Area Code Daytime Telephone Number  Enclosed is a check for the following amount:			
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspondence	ndence concerning this matter t	o the following:	
	ROHAN	E-SHIH	
	6001 N. FAL	LS CIRCLE DE UNIT	401
	<u>LAUDERHE</u>	City/State and Zip Code	
	Clarion ccare 6 gimu	o be used for future annual report notifi	cation)
For further information of	oncerning this matter, please ca	lt:	
ROHAN E.	SHIH	at (954) 980 -	8241
Name (	n Person	Area Code Daytine	Telephone Number
Enclosed is a check for t	he 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

CLARION COMFORT CARE, LLC

(Name of the Limited L. (A F	lorida Limited L	<b>ny as it now appears on our re</b> .iability Company)	ecords.)		
The Articles of Organization for this Limited Liabil Florida document number 41400121705		were filed on <u>Avers î</u>	<del>-</del> 4, 2014	and assign	ned
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	limited liabi	lity company here:			
The new name must be distinguishable and contain the words	"Limited Liabil	ity Company," the designation	"LLC" or the ab	breviation "L.L.C	3."
Enter new principal offices address, if applicable	<b>:</b> :	6001 N. FAUS	CIRCLE	DR.	
(Principal office address MUST BE A STREET A	DDRESS)	UNIT 401			
		LAUDERHILL,	FL 333	\$ P	
Enter new mailing address, if applicable:		6001 N. FAUS	CIRCLE		• ,
(Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>	UNIT 401		22 25 25 25 25 25 25 25 25 25 25 25 25 2	1,
		LAUDERHILL,	FL 333	1990	1 4
B. If amending the registered agent and/or registered agent and/or the new registered office			ords, <u>enter</u>	ြံပုံ ယု the namညof	the new
Name of New Registered Agent:	SGRENETY	1 SUCCESS CEN	itel, Inc	** *	
New Registered Office Address:	1000 N·	STATE ROAD 7,  Enter Florida street a	SULTE ddress	209-4	<del></del>
<u>(</u>	AUDERD	ALE LAKES City	_, Florida	3331 <b>9</b> Zip Code	
New Registered Agent's Signature, if changing Regi	stered 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.

hanging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Address	Type of Action
			Add
			□ Remove
			Change
			□ Add
			□ Remove
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`an effective date i Note: If the date	f other than the d s listed, the date must b inserted in this bloc tive date on the Dep	e specific and k does not m	cannot be prior eet the applic	to date of filing able statutory	g or more than 9	(optional ) days after tiling nents, this date	) g.) Pursua	int to 60	05.0207 sted as
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