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12/22/2017

12122023573 From: Kimberly Laughrey

Division of Corporations

Florida Department of State

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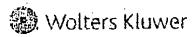
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RE	Caring People Midicare Services LLC	

COVER MESSAGE

Patrick Duffy
Associate Fulfillment Specialist
Global Fulfillment Operations
CT Corporation

Team 614-280-3338
GlobalFulfillmentTeam@wolterskluwer.com



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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

pr.

Caring People Medicare Services L						
(Name of the Limit	(A Florida Limited L	iy as it now appears on lability Company)	our records.)			
The Articles of Organization for this Limited Liability Company were filed on November				er 21, 2014 and assigned		
Florida document number L14000180969						
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name o	f the limited liabi	lity company here:				
,						
The new name must be distinguishable and contain the v	vords "Limited Liabili	ity Company," the design	nation "LLC" or the r	hbreviation "L-b.C	11	
Enter new principal offices address, if applic						
(Principal office address MUST BE A STREE						
				2	- 	
				-	Ü	
Enter new mailing address, if applicable:				_	j	
(Mailing address MAY BE A POST OFFICE	<u> BOX)</u>		 	<u> </u>	-	
		,	- 	· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	or registered of	<u>e</u> :	ur records, ente	r the name of	the new	
	1200 South Pin	c Island Road				
New Registered Office Address		änter Florida	street address			
	Plantation		, Florida <u>-</u>	, Florida <u>33324</u>		
	<u> </u>	City		Zip Code		
New Registered Agent's Signature, if changing	Registered Agent:					
I hereby accept the appointment as registery provisions of all statutes relative to the propaccept the obligations of my position as registeng filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as pregistered office change.	performance of my provided for in Cha address, I hereby of highing Registered Agent	oduties, and I an apper 605, F.S. O confirm that the i	i familiar with (r, if this docum	ana ent is	

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> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Gregory M. Barr	1560 Sherman Ave. Suite 1200	Add
		Evanston, IL 60201	Remove
			Change
MGR	. Andrew Gustafson	1560 Sherman Ave. Suite 1200	
		Evanston, IL 60201	D Remove
MGR	Steven East	5300 West Atlantic Blvd Suite 201	_ ■ Add
		Delray Beach, FL 33484	□ Remove
			☐ Change
AMBR	Steven East	701 South Olive Ave, Apt 1702	D Add
		West Palm Beach, FL 33401	₽ Remove
			Change
		<u> </u>	
			CI Remove
			Change
			Add
		<u> </u>	☐ Remove
			Change

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Effective date, if other than the if an effective date is listed, the date mus Note: If the date inserted in this ble document's effective date on the De	t be specific and cannot be price sek does not meet the applic	r to case of filing or more than 9 cable statutory filing require	(optional) 10 days after filing.) Purs ements, this date will r	nant to 605.020 tot be listed a)7 (3) Is the
the record specifies a delayed The 90th day after the rec	l effective date, but no ord is filed.	ot an effective time, at	t 12:01 a.m. on t	ne earlier (of:
Dated December 21	, 2017	_ _ ·			
	3				
	Signature of a member or sut	norized representative of a mon	nber		

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