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TALLAHASSEE FLORIDA

COVER LETTER

TÖ: F	Registration Se Division of Cor	ction porations		
SUBJEC		Holdings, LLC		
SUBJEC	1	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
		Michelle Larkin		
		 	Name of Person	·
		Cove One Holdings, LLC		
			Firm/Company	
		655 S.E. 1st Street		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
		 _	Address	<u> </u>
		Deiray Beach, FL 33483-	5303	16 NOV 22 PH 3: 35
			City/State and Zip Code	P
		ms@medibiotechrx.com	to be used for future annual report notif	(instign)
For further	r information co	oncerning this matter, please of		G. Comon)
Mark C. F	Perry		954 351-2601 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed i	is a check for th	e following amount:		
\$25.00	9 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)
	Registra	ING ADDRESS: ation Section	STREET/COURIE Registration Section Division of Corners	1

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cove One Holdings, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L14000190631}{L14000190631}$.	were filed on December 15, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	655 S.E. 1st Street	3 22
	Delray Beach, FL 33483-5303	<u> </u>
Enter new mailing address, if applicable:	655 S.E. 1st Street	RY CO
(Mailing address MAY BE A POST OFFICE BOX)	Delray Beach, FL 33483-5303	7 70
		성 출
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		r the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
		655 S.E. 1st Street	D Add
		Delray Beach, FL 33483-5303	□ Remove
			☐ Change
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). If amending any other information, enter change(s) here: (Attach addition)	al sheets, if necessary)	
		
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TORON Altern June 18 and an Alexander Alexande	ć-ntional)	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or mor Note: If the date inserted in this block does not meet the applicable statutory filing	(optional) r tran 90 days after filing.) Pursuant to	605,0207 (3)(b)
document's effective date on the Department of State's records.	requirements, this date will not be	listed as the
·	1	. 1*
the record specifies a delayed effective date, but not an effective tire. The 90th day after the record is filed.	ne, at 12:01 a.m. on the ea	mier or:
11/0/11/2	1000	
Dated	·	
Signature of a member or authorized representative o	f s trember :	-
Michelle Larkin Typed or printed name of signee		-
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Page 3 of 3		
Filing Fee: \$25.00	ş	