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PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer]
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COVER LETTER®

Division of Co.	rporations					
SUBJECT: EMEDPA						
Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please return all correspondence	ondence concerning this matter	to the following:				
	Robert E. Johnson					
		Name of Person	****			
	emedpa llc					
		Firm/Company	<u></u>			
	36401 E Eldorado Lake Dr	ive				
		Address				
•	Eustis, FL 32736					
		City/State and Zip Code				
	emedpa@msn.com					
	E-mail address: (t	to be used for future annual report notif	ication)			
For further information c	oncerning this matter, please ca	dl:				
Robert E. Johnson		321 297-7115 at ()				
Name o	f Person	Area Code Daytime	Telephone Number			
Enclosed is a check for the	ne 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

TO:

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

FILED

ARTICLES OF ORGANIZATION2015 AUG -6 AM | | 47

SECRUTARY OF STATE TALLAHASSIF, FLORIDA

EMEDPA 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 April 3, 2015 and assigned Florida document number 1500059512 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: New Registered Office Address: Enter Florida street address

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

, Florida

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>	<u>Address</u>	Type of Action
MGR	Robert E. Johnson	36401 E Eldorado Lake Drive	■ Add
		Eustis, Florida 32736	□ Remove
			☐ Change
			Add
			□ Remove
	·		☐ Change
			Add
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Effective date, if other than	the date of fili	ing:		_ (0	optional)	
Effective date, if other than a (If an effective date is listed, the date Note: If the date inserted in this	must be specific a s block does no	and cannot be prior	to date of filing of	r more than 90 days ling requirements.	after filing.) Pursuant to 6 this date will not be li	05.0207 sted as
document's effective date on the	Department of	f State's records.				
he record specifies a dela The 90th day after the i	yed effective ecord is file	e date, but no d.	t an effectiv	e time, at 12:0	1 a.m. on the ear	lier of
Dated June 30		2015				
		-,	 •			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00