L15000131291

(Requestor's Name)

(Address)

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(Business Entity Name)

(Document Number)

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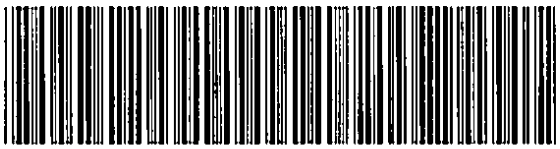

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DIVISION OF CORPORATIONS
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N COOPER

AUG 16 2018

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: insulinNG LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rolf-Peter Mlczarek
Name of Person

insulinNG LLC
Firm/Company

3030 N. Rocky Point Dr
Address

Tampa, FL 33607
City/State and Zip Code

rpm@proinsulin-ng.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Tremmel at (239) 913-9136
Name of Person — Area Code — Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $25.00 Filing Fee

■ $30.00 Filing Fee & Certificate of Status

☐ $55.00 Filing Fee & Certified Copy (additional copy is enclosed)

☐ $61.00 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

insulinNG LLC

(Name of the Limited Liability Company as it now appears on our records.)
[illegible]

The Articles of Organization for this Limited Liability Company were filed on ~~[illegible]~~ July 31, 2015 and assigned Florida document number L15000134291

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: 3030 N ROCKY POINT DR.
(Principal office address MUST BE A STREET ADDRESS) SUITE 150A
TAMPA, FL 33607

Enter new mailing address, if applicable: 3030 N. ROCKY POINT DR.
(Mailing address MAY BE A POST OFFICE BOX) SUITE 150A
TAMPA, FL 33607

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:**

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Name of New Registered Agent ______________________________

New Registered Office Address ______________________________
[illegible]

______________________________ Florida ______________
[illegible] [illegible]

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 being added or removed from our records:</u>

MGR – Manager
AMBR – Authorized Member

Title	Name	Address	Type of Action
MGR	Christopher DeNisco		☐ Add
		12[illegible] NW Mariner Cen	☒ Remove
		Palm City, FL 3499[illegible]	☐ Change
MGR	Tony R. Rodriguez		☐ Add
		1 Darwin	☒ Remove
		Irvine, CA 92620	☐ Change
MGR	Rolf-P. Milczarek		☒ Add
		3030 Rocky Point N. Drive	☐ Remove
		Tampa, FL 33607	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: ______________________ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the **document's effective date on the Department of State's records.**

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated August 9th, 2018

[signature]

Signature of a member or authorized representative of a member

Rolf-Peter Milczarek

Typed or printed name of signee

Filing Fee: $25.00