115000147166

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A. BUTLER MAR 2 1 2022

COVER LETTER

TO: Registration Section Division of Corporation		. •	
SUBJECT: <u>280</u>	SI SW 24 Name of Limi	ST LLC'	
The enclosed Articles of Ar	nendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
)awn Michan	
		Firm/Company	
	11317	Rosecreek	Drive
	Moore	Park CA City/State and Zip Code	93021
	<u>dawn m</u> E-mail address: (1	42@ Gmail. C	om Tication)
For further information con-	cerning this matter, please ca	all:	
Dawn Name of P	Michael	at (<u>805</u>) <u>732</u> 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)	\$ \$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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAR -7 AM 6: 48

2801 SW 24 S	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records) (AHASSEE, FL Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 15000147166</u> . This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)	Clo Dawn Michael 11317 Rosecreek Dr. Moorepark, CA 93021
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Clo DAWN Michael 11317 ROSECIEEK Dr MOOTEPARK, CA 93021
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
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 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	DAWN Michael	11317 Rosecreek Dri	Vo TAdd
		Moorepark, CA, 93021	□Remove
		 	DChange
MGR	Abilio Ramos, M.D.	430 Avenida de los Art	Do kis Add
		Thousand OAKSCA 91360	D Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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Note: 1	e date, if other than the date of filing:
ne 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 d.
ord is file	
Dated _	3/2, <u>22</u> .
ord is filed	3/2 , 22 Signature of a member or authorized representative of a member

Filing Fee: \$25.00