## 115000174262

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## **COVER LETTER**

то:	Registration Se Division of Cor			
OF 113 FT		e Management LLC		•
SUBJE	UI;	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Konstantin Maximowitsch		
		Reliant Care Management	Name of Person LLC	<del></del>
			Firm/Company	
		433 PLAZA REAL SUITE 275 (MIZNER PAI	RK)	
		BOCA RATON, FL 33432	Address 2	
		kotmaximo@gmail.com	City/State and Zip Code	<del></del>
		E-mail address: (	to be used for future annual report notifi	cation)
For furt	her information co	oncerning this matter, please ca	all:	
Konstar	ntin Maximowitse	rh	954 832 6394 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	e following amount:		
□ <b>\$</b> 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:

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 ARTICLES OF ORGANIZATION OF

Reliant Care Management LLC					
(Name of the Limi	ited Liability Compa (A Florida Limited	any as it now appears on ( Liability Company)	our records.)		
The Articles of Organization for this Limited Liability Company were filed on $\frac{10/13/2015}{L15000174262}$ .					
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liah	oility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design	ation "LLC" or the abbre	viation "L.L.)	
Enter new principal offices address, if appli	433 PLAZA REALSUITE 275 (MIZNER PARK)				
(Principal office address MUST BE A STRE		BOCA RATON, FL	33432	35 8	SE LIS
				— <u>—</u> 8	
Enter new mailing address, if applicable:				AH	
(Mailing address MAY BE A POST OFFICE			7: 03	KO   73	
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:			records, <u>enter th</u>	e name of	the nev
New Registered Office Address:	N/A	6 61 11			<del></del>
		Enter Florida st	reel address		
		City	, Florida	Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:	•		zip coue	
			anien I famelana annan	ea aanah	aniela ela
I hereby accept the appointment as register provisions of all statutes relative to the projection as registers of my position as reg	per and complete	performance of my o	duties, and I am fan	illiar with	and

If Changing Registered Agent, Signature of New Registered Agent

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	JOSE GREGORIO GARCIA	433 PLAZA REAL SUITE 275 (MIZNER PARK)	<b>=</b> Add
		BOCA RATON, FL 33432	
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Effecti	09/01/2018  ve date, if other than the date of filing:		
f an eff Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursually the date inserted in this block does not meet the applicable statutory filing requirements, this date will n	uant to 605. iot be liste	.0207 (3 ed as th
docum	ent's effective date on the Department of State's records.		
o roc	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	ne earlis	er of
	90th day after the record is filed.	ic carne	01.
	09-14-2018:		
Dated	/ //// <b>/</b>		
Dated	Signature of a member or authorized representative of a member		

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Filing Fee: \$25.00