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## **COVER LETTER**

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TO: Registration Section Division of Corporations

SUBJECT: Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph Schwan Firm/Company 6750 NE 4th Court Address iami, FL 33138 City/State and Zip Code <u>Schwantes</u> <u>Enailand</u> <u>enailand</u> <u>enailaddress</u>: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Schwantes at (786) 623 3933 Name of Person Area Code Daytime Telephone Number 2016 APR Enclosed is a check for the following amount: لم \$60.00 Fiking Fee, م 🖆 \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) U (additional copy is enclosed) : .  $\frac{\omega}{2}$ MAILING ADDRESS: STREET/COURIER ADDRESS: **Registration Section Registration Section Division of Corporations Division of Corporations** P.O. Box 6327 **Clifton Building** Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ONE HOSPITAL (Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.)
The Articles of Organization for this Limited Liability Company w Florida document number $\underline{L16000052558}$	ere filed on $3/14/2016$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	y company here:
The new name must be distinguishable and contain the words "Limited Liability Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on our records, enter the name of the new

gistered agent and/or the new registered office address here:		-2	07	
			Apn	1 C
Name of New Registered Agent:		52°	<u> </u>	
		H-K	ഗ	TTI -
New Registered Office Address:	Enter Florida street address		Ū.	0
			بب	
	, Florida	<u> </u>	<u></u>	<u> </u>
City		> Z	ip 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	<u>Type of Action</u>
AR	Ken Nagid	2020 NE 163rd Street Ste. 201	Add
		North Minni Beach, FC 3316	2 Remove
		2020 NE 163rd Street Ste. 201	Change
AR	Chen Nagid	North Miami Beach, FL 3316	Add
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" 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:	-
(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 19 605.0207	(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 document's effective date on the Department of State's records.	the
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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.	3
(b) The 90th day after the record is filed.	
Dated March 25, 2016.	
Signature of a member or authorized representative of a member	
Daran Maran	
Typed or printed name of signee	

Filing Fee: \$25.00