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A. RAMSEY MAR BY 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:		IEART HEART HEALTH CA	RE SERVICES, LLC STAFFING SOL	UTION
		Name of Lim	ited Liability Company	
The encloses	d Anticles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	ı all correspo	ndence concerning this matter	to the following:	
		HERVE JEAN-LOUIS		ing: of Person ompany dress 12 Ind Zip Code future annual report notification) 54 446-3554 va Code Daytime Telephone Number Pilling Fee & S60.00 Filling Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		-	Name of Person	
			Firm/Company	<u></u> .
		1474 SW 26 Ave		
			Address	
		DEERFIELD BEACH, FL	ORIDA 33442	
		justforherve1@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notificati	on)
For further i	nformation c	oncerning this matter, please ca	all:	
HERVE JE	AN-LOUIS			
	Name o	f Person	Area Code Daytime Tel	ephone Number
Enclosed is	a check for th	ne following amount:		
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
	niling Addres		Street Address: Registration Section	n

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ТО	MENDMENT				
ARTICLES OF OR OF	GANIZATION FILED none 2022 FEB 28 AHII: 19 us it now appears on our records. 14 17 5 5 10 15				
SACRED HEART SERVICES, LLC	2022 FEB 28 AMII: 19				
(Name of the Limited Liability Company a (A Florida Limited Liabi	is it now appears on our records.) Your lity Company)				
The Articles of Organization for this Limited Liability Company well-florida document number $\frac{1600003913}{1600003913}$	re filed on $\frac{03/30/2016}{}$ and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liability	company here:				
SACRED HEART HEALTH CARE					
The new name must be distinguishable and contain the words "Limited Liability C					
Enter new principal offices address, if applicable:	3471 N ANDREWS Ave				
(Principal office address MUST BE A STREET ADDRESS)	OAKLAND PARK, FL 33309				
_					
Enter new mailing address, if applicable:	1474 SW 26 AVE				
(Mailing address MAY BE A POST OFFICE BOX)	DEERFIELD BEACH, FL 33442				
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	ress on our records, <u>enter the name of the new registered</u>				
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>	Name	<u>Address</u>	Type of Action
			□Add
			Remove
			Change
			□Add
			☐ Change
			Remove
			Change
			□ Add
			□Change
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is listed, the date r inserted in this	nust be specific block does no	and cannot be p at meet the app	rior to date of filir plicable statutor	ig or more than (00 days after filir	ig.) Pursuant to 60:	5,0207 ted as
•						The 90th day afte	er the
February	7	206	9 2				
	Signature of	ya member or a	Litus juthorized represe	ntative of a men	iber		
1	is listed, the date reinserted in this ctive date on the	is listed, the date must be specific inserted in this block does no ctive date on the Department of a delayed effective date, but i	is listed, the date must be specific and cannot be per inserted in this block does not meet the apprixed date on the Department of State's recourse a delayed effective date, but not an effective	e inserted in this block does not meet the applicable statutor entire date on the Department of State's records. s a delayed effective date, but not an effective time, at 12:01	is listed, the date must be specific and cannot be prior to date of filing or more than 9 inserted in this block does not meet the applicable statutory filing require tive date on the Department of State's records.	is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing inserted in this block does not meet the applicable statutory filing requirements, this days tive date on the Department of State's records.	is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 inserted in this block does not meet the applicable statutory filing requirements, this date will not be listive date on the Department of State's records. It is a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the state of the state