

L160000 65019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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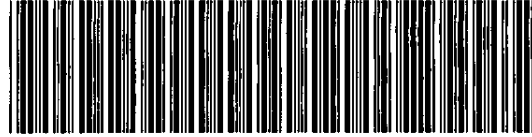
(Business Entity Name)

(Document Number)

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2016 JUN 13 PM 1:19
TALLAHASSEE, FL
DAIDA

2016 JUN 14 AM 7:35
TALLAHASSEE, FL
DAIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: San Juan Pharmacy LLC
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:

Yanet Rodriguez
Name of Person

San Juan Pharmacy, LLC
Firm/Company

9533 SW 40 Street
Address

Miami FL 33145
City/State and Zip Code

SanJuanPharmacia
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yanet Rodriguez at (305) 399-7449
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) ☐ \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO
ARTICLES OF ORGANIZATION
OF

San Juan Pharmacy LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/01/2016 and assigned Florida document number L16000065019.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

San Juan Health Clinic LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

9533 SW 40 Street
Miami FL 33145

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Name of New Registered Agent:

Trevor L. Bailey

New Registered Office Address:

9533 SW 40 St

Enter Florida street address

Miami

City

Florida

33145

Zip 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.

T. Bailey

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Yanet Rodriguez Andino	9533 SW 40 St	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Daniel Rodriguez Andino	9533 SW 40 St	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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Changing Name of LLC Changepney
Registered agent Remembering a manager.

16 JUN 14 AM 7:35
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STATE OF CALIFORNIA

E. Effective date, if other than the date of filing: 6/9/16 (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 6/9/, 2016.



Signature of a member or authorized representative of a member

Janet Rodriguez Andino

Typed or printed name of signer