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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Apex Sor7	S PERFORM ACE and REHAB LLC of Limited Liability Company
The enclosed Articles of Amendment and fee(s) a	re submitted for filing.
Please return all correspondence concerning this r	natter to the following:
_ Jaso	Stidham Name of Person
_ Apex	Sports Performance and Rehab Firm/Company
3290	Suntree Blu0 # 103
	rnl, FL, 32940 City/State and Zip Code
— Olx 300 E-mail add	or to per formance 3216 gmail. com dress: (to be used for future annual report notification)
For further information concerning this matter, pl	ease call:
Ja. Son Stigham Name of Person	at (321) 501 - 0426 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	•
□ \$25.00 Filing Fee Certificate of Sta	

### 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

The Articles of Organization for this Limited Liability Company were filed on  $\frac{9}{100}$ Florida document number L/100000 76106 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: New Registered Office Address: Enter Florida street address

### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

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Filing Fee: \$25.00