

L160000 99749

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2020 JUN 22 AM 6:53

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AUG 07 2020

S. YOUNG

6/16/20

Miami Holistic Care LLC
111 NE 1st Street, #908
MIAMI, FL, 33132
Att: Rhoda Lohier / Owner / Mgr.

Dear FLORIDA DEPT OF STATE,

Please accept this letter as Authorization to amend the articles for Miami Holistic Care LLC (MHC). Therein are 3 request for changes.

- 1) Address change from city of Miramar to city of Miami. That is the office address.
- 2) Removal of AMBR: JACQUES Lohier.
- 3) Removal of AMBR: MARIE PEGGY PARKER.

Thank you in advance. You may reach me at the address above or call me at: 305-898-4432.

Thank you,
Rhoda Lohier

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIAMI HOLISTIC CARE 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:

RHODA LOHIER
Name of Person

MIAMI HOLISTIC CARE, LLC
Firm/Company

6245 MIRAMAR PKWY
Address

MIRAMAR FL 33023
City/State and Zip Code

miami holistic care@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RHODA LOHIER at (305) 898-4432
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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

MIAMI HOLISTIC CARE LLC

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

2020 JUN 22 AM 5:53

FILED

The Articles of Organization for this Limited Liability Company were filed on 05/23/16 and assigned
Florida document number L16000099749

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" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

111 NE 1st St.

#908

MIAMI FL 33132

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

Florida

City

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.

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	LOHIER, JACQUES	1514 Millhouse DR. CARY, NC 27513	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	PARKER, MARIE PEGGY	13021 South 48 th St, # 2073 PHOENIX, AZ 85044	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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)

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.

June 16 2020

RHODA LOHIER

Typed or printed name of signee