116000137032

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DIVISION OF CORFORATIONS

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COVER LETTER

		tration Section of Corp			
CUDIEC	F	lorida-Gulf	Care International, LLC		
SUBJEC			Name of Limi	ited Liability Company	
The enclo	osed A	rticles of A	mendment and fee(s) are subr	mitted for filing.	
Please re	turn al	l correspon	dence concerning this matter t	to the following:	
			Michael Speck		
				Name of Person	78 Transaction of the Control of
			Michael Speck and Associa	ates, Inc.	
				Firm/Company	
			1912 B Lee Road		
				Address	
			Orlando, FL 32810		
				City/State and Zip Code	
			hchristopher7@mac.com		
			E-mail address: (t	to be used for future annual report notifi	cation)
For furth	er info	rmation co	ncerning this matter, please ca	all:	
Michael	Speck	Toni Slone	s	407 521-8973	
		Name of l	Person	Area Code Daytime	Telephone Number
Enclosed	l is a c	heck for the	following amount:		
□ \$25.6	00 Fili	ng 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:

TO:

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 **OF**

Florida-Gulf Care International, LLC		
(Name of the Limited Li (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabili	ity Company were filed on July 13, 2016	and assigned
Florida document number L16000137032	·	
This amendment is submitted to amend the following	g:	
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	:	<u> </u>
(Principal office address MUST BE A STREET A	DDRESS)	
		OF CORPORATION
		景 章 □
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u></u>	<u> </u>
		<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office		r the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
_	City	Zip Code
New Registered Agent's Signature, if changing Regis	stered 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

Title	Name	Address	Type of Action
MGR	Paula Rua	130 S Orange Avenue, Suite 150	
		Orlando, FL 32801	■ Remove
			Change
AMBR	Khalid Alagel	130 S Orange Avenue, Suite 150	⊟ Add
		Orlando, FL 32801	□ Remove
			Change
			□ Add
			Remove
			DIVIGENT OF CHARGOVE
			© 55 □ Change
			🗖 Add
			□ Remove
			Change
			□ Add
			□ Remove
			□ Change

	
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	FILED 16 OCT -7 AH 8: \$5 DIVISION OF CORPORATIONS
	AH 8: \$5
E. Effective date, if other than the date of filing:	(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more the Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	un 90 days after filing.) Pursuant to 605.0207 (3)(t
If the record specifies a delayed effective date, but not an effective time, (b) The 90th day after the record is filed.	at 12:01 a.m. on the earlier of:
Dated <u>Sept. 29</u> , <u>2016</u> .	
Signature of a member or authorized representative of a member of a member of authorized representative of a member of a membe	nember

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Typed or printed name of signee

Filing Fee: \$25.00