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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

November 21, 2016

REVOLUTION HEALTH CARE, LLC 9025 TOWN CENTER PARKWAY LAKEWOOD RANCH, FL 34202

SUBJECT: REVOLUTION HEALTH CARE, LLC

Ref. Number: L16000174547

We have received your document for REVOLUTION HEALTH CARE, LLE and Some your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 516A00024915

www.sunbiz.org

6297 Tollahagaaa Florida 29214

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Revolution Health Care, LLC					
(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our s liability Company)	ecords.)	<u>≯</u> 86	
The Articles of Organization for this Limited Li Florida document number L16000174547	ability Company	were filed on 9/19/16		CRATARY LAMASSE	Section.
This amendment is submitted to amend the following	wing:			Egg 😤	- E E
A. If amending name, enter the new name of	the limited liab	ility company here:	-	O: 06 SIAIE	te man
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the designation	"LLC" or the abbro	eviation "L.L.C."	
Enter new principal offices address, if applica	able:	9025 Ja	us Cente	x Parkus	id,
(Principal office address MUST BE A STREE	T ADDRESS)	14202	d Rau	ch FI	<u>r</u> _
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>30X)</u>	Sauce			<del></del>
B. If amending the registered agent and/or registered agent and/or the new registered of			cords, enter th	e name of the	e new
Name of New Registered Agent:	My Cha	al 13 100	jav.		_
New Registered Office Address:	9025 7	Enter Florida street d	Paulcuz		
	Lake w	cod Ranch	_, Florida	F 1 3° Zip Code	4202

## 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

Page 1 of 3

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>	Address	Type of Action
MGR	Rebecca Patton	14438 Sundial Place	
	<del>-</del>	Lakewood Ranch, FL 34202	Remove
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E. Effective date, if other than the date of filing (If an effective date is listed, the date must be specific and	cannot be prior to date of fi	ing or more than 90 days afte	ional) er filing.) Pursuant to 6	05.0207 (3)
Note: If the date inserted in this block does not m document's effective date on the Department of St	eet the applicable statute	ory filing requirements, thi	is date will not be li	sted as the
f the record specifies a delayed effective debt). The 90th day after the record is filed.	ate, but not an effe	ctive time, at 12:01	a.m. on the ear	lier of:
Dated 10-25.2016.	2016			
1100				
/ 1 / 1 / 1 / .				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00