

# L16 000193853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

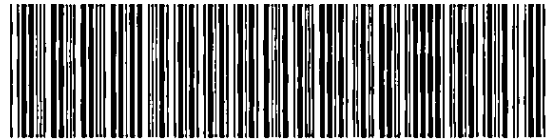
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JUN - 7 2022

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FILED  
2022 JUN -6 PM 12:32  
TALLAHASSEE, FLOR.  
RECEIVED  
2022 JUN -6 PM 4:22  
TALLAHASSEE, FLOR.

QWIK COURIER

850-284-4584

773-954-6579

PLEASE PROCESS THE FOLLOWING.

PLEASE DO NOT PUT OUR NAME ON COVER LETTER

PLEASE USE NAME ON THE REQUEST.

**PLEASE PUT IN OUR BOX WHEN COMPLETED**

CUSTOMER Care LG 2016 Holdings LLC  
Ulysses Felder

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CARE LG 2016 HOLDINGS 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:

Ulysses Felder

\_\_\_\_\_  
Name of Person

Law Offices of Felder & Associates

\_\_\_\_\_  
Firm/Company

2847 Hollywood Blvd. Suite 121

\_\_\_\_\_  
Address

Hollywood, FL 33020

\_\_\_\_\_  
City/State and Zip Code

eservice@ufelderlaw.com

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

For further information concerning this matter, please call:

Victoria Lora

\_\_\_\_\_  
Name of Person

at ( 954 )

\_\_\_\_\_  
Area Code

442-7600

\_\_\_\_\_  
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**

CARE LG 2016 HOLDINGS LLC

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

FILED  
2022 JUN -6 PM 12:32  
SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 10/20/2016 and assigned  
Florida document number L16000193853

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:**

217 SE 9TH COURTHALLANDALE, FL 33009

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

217 SE 9TH COURTHALLANDALE, FL 33009

**(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:

Ulysses Felder

New Registered Office Address:

2847 Hollywood Blvd. Suite 121

*Enter Florida street address*

Hollywood

*City*

Florida 33020

*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.*

/s/ Ulysses Felder

**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	TERRY MILLER	260 Crandon Blvd. 32-430, Key Biscayne, FL 33149	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ROMAN NEMIROVSKY	217 S.E. 9th CT. Hallandale, FL 33009	<input checked="" type="checkbox"/> Add
			<input 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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.

Signature of a member of authorized representative of a member

Typed or printed name of signee