L16000201623

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M. MILLIGAN MAY 30 2018 2018 MAY 30 AM IO: 5

COVER LETTER

Division of Corporations
SUBJECT: Rehab Metwork CC
Name of Emined Flability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alice Bradshaw
Rehab Metwork LLC
134 Pixie Circle
CRaw forchille FL 32327 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alice Broad Shaw at 850, 405-3726 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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**

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ARTICLES C	OF ORGANIZATION
	OF State of the st
RchaB Nety	OF ORGANIZATION OF OORK Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com-	pany were filed on May 30,2018 and assigned
Florida document number <u>U6000201623</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The state of the s	
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:	134 Pixie Cir.
(Principal office address MUST BE A STREET ADDRES	134 Pixie Cir. Crawfordville
	FC 35357
	174 Divid Cic
Enter new mailing address, if applicable:	134 Pixie Cir. Crawfordville
(Mailing address MAY BE A POST OFFICE BOX)	Clawford VIIIC
	FC 32327
	ed office address on our records, enter the name of the new
registered agent and/or the new registered office addres	s here:
Name of New Registered Agent: ACC	e Bradshaw
New Registered Office Address: 13 9	Pixie Cic Enter Florida street address
C_{∞}	wfordville Florida 32327
<u>va</u>	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.

City

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 | <u>Address</u> **Type of Action** AP Nicholas Whytsell 8209 Sudbury Dr.

Port Richey _ 🗆 Add Remove FL 34668 _□ Change _□ Add ☐ Remove □ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Add □ Remove __ Change

□ Add

_□ Remove

□ Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary,	1		
	-		
			
Effective date, if other than the date of filing: May 30,20/8 (optional) (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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. of The 90th day after the record is filed.	ill not be	: listed	as the
Dated May 30 , 2018 .	TAL CAR	2018 HAY 30	- T
5 Signature of a member or authorized representative of a member	Silver	င်္သ	-
Signature of a member or authorized representative of a member Alice Bradshaw Typed or printed name of signee	SEE.FLO	0 AM 10: 57	Ė

Filing Fee: \$25.00