L17000027169

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Sasmoss Enal) Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| 0 11 1 1 1 1 1 1 |
| Special Instructions to Filing Officer: |
| |
| · |
| |
| |
| |
| |
| , |

Office Use Only



200296047232

03/01/17--01015--010 **25.00



Business Law Center of the Palm Beaches

Gardens Professional Center 9121 North Military Trail | Suite 107 | Palm Beach Gardens | Florida 33410 Telephone 561.630.4800 | Facsimile 561.296.4848 BusinessAttorneyPalmBeach.com

Jay E. Eckhaus

jeckhaus@ BusinessAttorneyPalmBeach.com Member: Florida - New York - Ohio Bars

February 28, 2017

VIA Federal Express Priority Overnight

Registration Section
Division of Corporations
2661 Executive Center Circle
Clifton Bldg.
Tallahassee, FL 32301

Re: NORTH AMERICAN VETERINARY HEART CENTER LLC

Dear Sir or Madam:

Please find attached the Articles of Amendment for the above referenced limited liability company together with a check for the \$25 filing fee.

Please note this amendment is solely for adding Giovanni Di Stadio as AMBR.

Thank you.

Sincerely,

. ECKHAUS

Enclosure:

Articles of Amendment Check No. B175677

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| NORTH AMERICAN VETERINARY HEA | · · · · · · · · · · · · · · · · · · · | |
|--|---|-----------------------------------|
| (<u>Name of the Limited Liabili</u> (A Florida | ty Company as it now appears on our rec a Limited Liability Company) | ords.) |
| The Articles of Organization for this Limited Liability C Florida document number $\frac{L17000027169}{L17000027169}$ | Company were filed on 02/02/2017 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lim | ited liability company here: | |
| he new name must be distinguishable and contain the words "Lim | ited Liability Company," the designation "L | .LC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET ADDI | RESS) | SE ALL |
| | | |
| | | S T topular |
| nter new mailing address, if applicable: | | 33.5 XX |
| Mailing address MAY BE A POST OFFICE BOX) | | ti prizante |
| | | 25 S |
| | | 5,7 5 |
| If amending the registered agent and/or regis egistered agent and/or the new registered office add | | rds, enter the name of the |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street ada | fress |
| | | 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, <u>enter the title</u>, <u>name</u>, <u>and address of each person</u> <u>being added or removed from our records</u>:

MGR = ·Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|--------------------|------------------------------|----------------|
| ambr | Giovanni Di Stadio | 12140 Aviles Circle | ≘ Add |
| | | Palm Beach Gardens, FL 33418 | ☐ Remove |
| | | | Change |
| | | | Add |
| | | | Remove |
| | · | | Change |
| | | | Add |
| | • | | □ Remove |
| | | ·*· | □ Change |
| | | · | Add |
| | | | □ Remove |
| • | | | □ Change |
| | | | Add |
| | | | □ Remove |
| | | | ☐ Change |
| | | | Add |
| | | | □ Remove |
| | | | □ Change |

| 1 · · · · · · · · · · · · · · · · · · · | | | | | | |
|--|------------------|--|--|---|------------------------|--------------------|
| | | | _ _ | | | - |
| | | | | | | |
| | | | | | | - |
| | | | | | | |
| | | | | | | |
| | | | | , | 1 | |
| | | | | | | |
| | · | | | | | |
| | | | | | | |
| | | | | >07 | | |
| | | | . | | 7 | |
| | | | | 至 | 20 | , , |
| | ~ | | | SES. | | - 17 A - 1922 |
| | | | | <u> </u> | 3 | - |
| | | | | F.S | <u></u> | |
| | | | | DRIED STEE STEE STEE STEE STEE STEE STEE ST | 22 | |
| | | | | <u>Crri</u> | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | - <u>-</u> | | | | | |
| ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be perfective date inserted in this block does not meet the appument's effective date on the Department of State's reco | plicable statute | ling or more than 9 ory filing require | (optiona 0 days after fili ments, this da | ng.) Pursi | uant to 6 iot be li | 605.020 isted a |
| record specifies a delayed effective date, but he 90th day after the record is filed. | not an effe | ective time, at | 12:01 a.m | ı. on ti | he ear | lier d |
| ed February 28 , 2017 | · | | | | | |
| at the second | At 1 | <u></u> | | | | |
| | 11871111111 | | | | | |

Page 3 of 3

Filing Fee: \$25.00