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601 21ST STREET— SUITE 300 — VERO BEACH, FLORIDA — 32960 TELEPHONE: 772.778.8885 — E-MAIL: postmaster@rappelhealthlaw.com

June 15, 2017

CERTIFIED MAIL-RETURN RECEIPT REQUESTED Article Number: 7015 1520 0002 0138 7976

Registration Section Division of Corporations P.O Box 6327 Tallahassee, Florida 32314

Re:

Articles of Amendment to Articles of Organization

INTEGRATED PARTNERS GROUP, LLC

Dear Sir/Madam:

Please find enclosed Articles of Amendment to Articles of Organization of INTEGRATED PARTNERS GROUP, LLC, along with a check in the amount of Fifty-Five and 00/100ths Dollars (\$55.00) for Filing of the Articles of Amendment to Articles of Organization, and receipt of a Certified Copy, which are being submitted in accordance with Section 605.1035, *Florida Statutes*. We have already submitted our check in the amount of Fifty-Five and 00/100ths Dollars (\$55.00) for the filing of the Amendment to the Articles of Organization

Please return all correspondence concerning this matter to:

Robert Rappel, DO, JD Rappel Health Law Group, PL 601 21st Street, Suite 300 Vero Beach, Florida 32960 Telephone: 772.778.8885

Electronic Correspondence: drr@rappelhealothlaw.com

Should you have any questions regarding the above, please contact us at your convenience.

Very truly yours,

RAPPEL HEALTH LAW GROUP

A Professional Limited Liability Company

ROBERT RAPPEL, D.O., J.D.

For the Firm

/drr

Enclosures: as stated

cc: Rebekah Brooks, Manager

§ MEMBER OF LAW SOCIETY OF ENGLAND & WALES, SRA NO. 492691

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTEG	RATED PARTNERS GROUP, LLC
(Name of the Limited Lia (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabilit Florida document number L17000087655	RATED PARTNERS GROUP, LLC ability Company as it now appears on our records.) orida Limited Liability Company) ty Company were filed on April 19, 2017 and assigned
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:	
(Principal office address MUST BE A STREET AD	ODRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2
B. If amending the registered agent and/or registered agent and/or the new registered office a	egistered office address on our records, enter the name of the laddress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zin 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, 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>	Type of Action
MGR	Rebekah Brooks	2898 Florida Boulevard DELEAY DEACH FL 33483	Add
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record specifies a c he 90th day after t			ut not an eff	fective time, a	at 12:01 a.m	on the earlier of
June 14		2017				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00