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| SUBJEC | 1: <u></u> | Name of Lim | Name of Limited Liability Company | | | | |
| The enclo | sed Articles of | Amendment and fee(s) are sub | mitted for filing. | | | | |
| Please ret | um all correspo | ondence concerning this matter | to the following: | | | | |
| | | Gabriel Busquets | | | | | |
| | | | Name of Person | | | | |
| | | Primero Spine and Joint, L | LLC | • | | | |
| Firm/Company | | | | | | | |
| 13241 Bartram Park Blvd., Ste 2501 | | | | | | | |
| | | | Address | | | | |
| | | Jacksonville, FL 32258 | | | | | |
| | | | City/State and Zip Code | | | | |
| | | office@primerospineandjoi | | | | | |
| For furthe | r information c | E-mail address: (oncerning this matter, please co | to be used for future annual reportall: | notification) | | | |
| Gabriel B | susquets | | 561 843-765- at () | ا (<u>هُ</u> اللهِ المِلْمُلِي المِلمُلِي المِلْمُلِي المِلْمُلِيِّ اللهِ اللهِ المِلْمُلِي المِلْمُ | | | |
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| | Registr Divisio P.O. Bo | ING ADDRESS: ation Section in of Corporations ox 6327 assee, FL 32314 | STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL | rporations g : Center Circle | | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Primero Chiropractic and Wellness LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on June 06, 2017 and assigned Florida document number L17000123822 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Primero Spine and Joint, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 13241 Bartram Park Blvd. Enter new principal offices address, if applicable: Suite 2501 (Principal office address MUST BE A STREET ADDRESS) Jacksonville, FL 32258 Enter new mailing address, if applicable: (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: U New Registered Office Address: Enter Florida street address Florida City 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.

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

| If amending or removed | Authorized Person(s) authorized to n from our records: | nanage, <u>enter the title, name, a</u> | nd address of each person being added |
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