

**Florida Department of State**  
**Division of Corporations**  
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To:

Division of Corporations  
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From

Account Name : STEPHEN S. MATHISON, P.A.  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address:

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**REGULATED SOLUTIONS LLC**

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Corporate Filing Menu

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D. SCOTT  
SEP 19 2017

(((H17000245377 3)))  
**ARTICLES OF AMENDMENT  
 TO  
 ARTICLES OF ORGANIZATION  
 OF**

REGULATED SOLUTIONS, 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 06/09/2017 and assigned Florida document number L17000127103.

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:

5606 PGA BLVD., #211

(Principal office address MUST BE A STREET ADDRESS)

PALM BCH GARDENS, FL 33418

Enter new mailing address, if applicable:

5606 PGA BLVD., #211

(Mailing address MAY BE A POST OFFICE BOX)

PALM BCH GARDENS, FL 33418

**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:

New Registered Office Address:

Enter Florida street address

City, Florida

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

(((H17000245377 3)))  
 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>
MGR	DEGRAZIA, T	9700 SUNRISE LAKES FL # 204	<input type="checkbox"/> Add
		SUNRISE, FL 33322	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DEHON, FREDERIC T. JR.	5606 PGA BLVD., #211	<input type="checkbox"/> Add
		PALM BCH GARDENS, FL 33418	<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input 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"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: ((H17000245377 3)) (attach additional sheets, if necessary.)

F. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
 (If an effective date is listed, the date must be specific.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated SEPTEMBER 18 2017

Signature of a member or authorized representative of a member

FREDERIC T. DEBON, JR.

Typed or printed name of signee