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## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	CT: ToTem Medical Solutions LLC Name of Limited Liability Company
The en	osed Articles of Amendment and fee(s) are submitted for filing.
Please	eturn all correspondence concerning this matter to the following:
	Anna Talerico Name of Person  Anna Talerico Name of Person
	Firm/Company SSEC
	Firm/Company  1530 SE 12Th St  Address  Deer field Beach FL 33447  City/State and Zip Code  PJLawrenson & Totem medical solutions. Cor  E-mail address: (to be used for future annual report notification)  mer information concerning this matter, please call:
	Deerfield Beach FL 33497 6
	PJLawrenson @ Totemmedical solutions. Cor E-mail address: (10 be used for future annual report notification)
For fur	ner information concerning this matter, please call:
<u>- A</u> v	Name of Person at (954) 864-4037  Area Code Daytime Telephone Number
Enclose	I is a check for the following amount:
Ø \$2±	00 Filing Fee Solution Solution Status Solution
	MAILING ADDRESS:  Registration Section  Division of Corporations  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

To Tem Mec/ICA/ (Name of the Limited Liability Comp (A Florida Limited	50/UT, ONS LLC
(A Florida Limited	d Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number $\frac{L}{170001482}$	ny were filed on 11 July 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	ability company here:
The new name must be distinguishable and contain the words "Limited Liab	ibility Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	TS E
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	THE SEE THE DESTRUCTION OF SECULAR PROPERTY OF SECURAR PROPERTY OF SECULAR PROPERTY OF SECURAR PROPERTY OF SECURATION PROPERTY OF SECURATI
	office address on our records, enter the name of the new
registered agent and/or the new registered office address he	<u>ere</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	Cu) Zap Cotte

If Changing Registered Agent, Signature of New 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

New Registered Agent's Signature, if changing Registered Agent:

company has been notified in writing of this change.

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>	Address	Type of Action
AP	Anna Talerico	1530 SE 12th 5t	□ Add
		Deerfield Beach	Remove
		FL 33441	Change
MGR	Paul Lawrenson	1530 SE 12th 51	<b>⊠</b> Add
		Deerfield Beach,	☐ Remove
		FL 33441	Change
- <del></del>			
			□ Remove
			Change
			🗆 Add
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an effective date is listed <b>Note:</b> If the date insert	er than the date of filin I, the date must be specific and ted in this block does not rate on the Department of S	d cannot be prior to da meet the applicable	ite of filing or more than 9	(optional) Odays after filing ments, this date	.) Pursuant to 605	.020° ed as
	a delayed effective of the record is filed.		n effective time, at	12:01 a.m.	on the earlie	er o
latedUL	1 26	. 2017.				
<del></del>	Signature of a	member or authorize	d representative of a mem	ber		
			<u>Jerico</u> me of signee			

Page 3 of 3

Filing Fee: \$25.00