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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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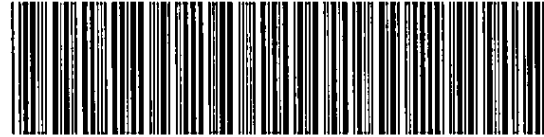
(Business Entity Name)

(Document Number)

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DUNLAP | MORAN
ATTORNEYS AT LAW

May 16, 2018

18292-1
Via Federal Express
Tracking No. 7722 4581 7658

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

**RE: Subsero Care, LLC
Articles of Amendment**

To Whom it May Concern:

Enclosed please find our firms Check No. 52541 in the amount of \$25.00 to cover the filing fee for Subsero Care, LLC's Articles of Amendment (also enclosed).

Please files the Articles at your earliest convenience.

If you have any questions, please do not hesitate to contact me.

Very truly yours,

DUNLAP & MORAN, P.A.

*Dictated but not read to avoid
Delay in sending*

Clare B. Therieau
Paralegal to John A. Moran,
Esq.

JAM:ct/18292-1/Name Change/Ltr to Div of Corp 5.16.18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUBSERO CARE, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John A. Moran, Esq.

Name of Person

Dunlap & Moran, P.A.

Firm/Company

22 S. Links Ave, Ste 300

Address

Sarasota, FL 34236

City/State and Zip Code

jmoranstaff@dunlapmoran.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John A. Moran, Esq

941) 366-0115
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SUBSERO CARE, 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 9/22/17 and assigned
Florida document number L17000197004.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SUBSERO HEALTH, LLC

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 ADDRESS)

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:

New Registered Office Address:

Enter Florida street address

_____, 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, 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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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		_____	<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

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

2018

2018



Signature of a member or authorized representative

Signature of a member or authorized representative of a member

John A. Moran, Esq/Authorized Representative

Typed or printed name of signee