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DIVISION OF CORPORATION

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COVER LETTER

Division of Corp	porations		
VC HCT, L	LC		
Someti.	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Jason O. Floyd		
	•	Name of Person	
	Vestcor Companies, Inc.		
		Firm/Company	
	3030 Hartley Road, Suite 2	310	
		Address	
	Jacksonville, Florida 3225	7	
		City/State and Zip Code	1 = 1,44+
	bowles@vestcor.com		
	E-mail address: (to be used for future annual report notif	ication)
For further information co	ncerning this matter, please ca	all:	
Jason O. Floyd		904 288-7822 at ()	
Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	e 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

TO:

Registration Section

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

VC HCT, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on October 16, 2017	and assigned
Florida document number L17000214040		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the a	hbreviation "L.L.C."
Enter new principal offices address, if applicable:		0
(Principal office address MUST BE A STREET ADDRES.	<u></u>	88 //Sil
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		78 28
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		∵ ≅
		07
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	· · · · · · · · · · · · · · · · · · ·	the name of the
Name of New Registered Agent:		· <u>-</u>
New Registered Office Address:	3 - W 3	
	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>	Address	Type of Action
MGR	Vestcor, Inc.	3030 Hartley Road, Suite 310 Jacksonville, FL 32257	
			■ Remove
			Change
MGR	JDR Partners, Inc.	3030 Hartley Road, Suite 310 Jacksonville, FL 32257	
			□ Remove
			Change
			Add
		.	Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
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ffective date, if other than the dan effective date is listed, the date must be to the late of the date inserted in this block becament's effective date on the Dep	e specific and cannot k does not meet the	e applicable s			r filing.) Pursuant t	
e record specifies a delayed The 90th day after the reco		out not an	effective time	e, at 12:01 a	a.m. on the e	arlier d
ated August 27	2013	8				
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Filing Fee: \$25.00