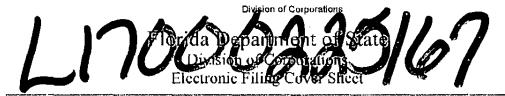
12/7/2017



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To:

Division of Corporations

Fax Number

: (858)617-6383

From:

: LEGALZOOM.COM ING. Account Name

Account Number : 120010000062 Phone

: (323)962-8600

: (323)962-3889

Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please.

Email Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **B&R ANESTHETICS, LLC**

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COVER LETTER

TO:	Registration Sec Division of Corp			
04:D15		STILETICS, LLC		
SUBJE	WI;	Name of Limi	ited Liability Company	and the second s
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		101 N. Brand Blvd., 11t	h Floor	
			Address	
		Glendale, CA 91203		_
			City/State and Zip Code	
		hallm2002@yahoo.com		
For fur	ther information co	e-mail address: (i oncerning this matter, please ca	to be used for future annual report notifiall:	(Call Ob)
Cheyenne Moseley			800 773-0888 ex	xt. 9724
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
□ \$2:	5.00 Filing Fce	□ \$30,00 Filing Fee & Certificate of Status	(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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B&R ANESTHETICS, LLC		
(Name of the Limited Liability Comos (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 10/31/2017	and assigned
Florida document number L17000225167	333 	
This amendment is submitted to amend the following:	·	10000000000000000000000000000000000000
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited List	pility Company," the designation "LLC" o	r the abbreviation "L.L.Co"
Enter new principal offices address, if applicable:	226 N Nova Rd. #215	957 0
(Principal office address MUST BE A STREET ADDRESS)	Ormond Beach, FL 32174	Der 1
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE ROX)	226 N Nova Rd. #215 Ormond Beach, FL 32174	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		nter the name of the nev
Name of New Registered Agent:	<i>y</i> s	
New Registered Office Address:		
THE PROPERTY OF THE PROPERTY O	Enter Florida street address	
	. Florid	a
	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

Page 1 of 3 "

IGR = Ma MBR = Au	anager Ithorized Member		
<u>îtle</u>	<u>Name</u>	Address	Type of Action
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Ro		D 1 (12.1 0 1 D) 1 D) 00.1 1		
	Robert F Hall III - 226 N Nova Rd. #215, Ormond Beach, FL 32174 Brittany L Deitz - 226 N Nova Rd. #215, Ormond Beach, FL 32174			
Bri				
				
	<u>. ·</u>			
E. Effective	e date, if other than the date	of filing: prior to date of receipt or filed date and cannot be more than	(optional) 190 days after	
the date t	his document is filed by the Florida	Department of State)	• • •	
Dated	November 28	2017		
		Teset f. Han III		
	Signa	ature of a member or authorized representative of a memb	cr	
		Robert F Hall III Typed or printed name of signee		
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