L17000251621

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

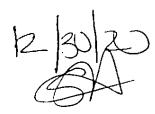




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COVER LETTER

	Registration Se Division of Cor			
SUBJEC	Limitless M	fedical Logs LLC		
30131,0		Name of Lim	tited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please ret	turn all correspo	ndence concerning this matter	to the following:	
		Jordan L Ray		
			Name of Person	
		Limitless Medical Logs Ll	LC	
		-	Firm/Company	
		319 Clematis Street Suite	314	
			Address	
		West Palm Beach/Florida	33401	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notifica	ation)
For furthe	er information c	oncerning this matter, please c	all:	
Jordan L	Ray		561 985-9662 at ()	
	Name o	f Person	Area Code Daytime T	elephone Number
Enclosed	is a check for th	ne following amount:		
\$25.0	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)
<u>.1</u>	<u> Mailing Addres</u>	<u>s:</u>	Street Address:	
J	Registration S	Section	Registration Section	on
Г	Division of C	amanatiana	Division of Como	mastama

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Limitless Medical Logs LLC					
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)				
he Articles of Organization for this Limited Liability Company	were filed on 12/08/2017 and assigned				
lorida document number L17000251621					
his amendment is submitted to amend the following:					
. If amending name, enter the new name of the limited liab	ility company here:				
ne new name must be distinguishable and contain the words "Limited Liabil					
nter new principal offices address, if applicable:	319 Clematis Street Suite 314 West Palm Beach 3340				
Principal office address MUST BE A STREET ADDRESS)	23 [8				
	- 20				
	ب				
nter new mailing address, if applicable:	319 Clematis Street Suite 314 West Palm Beach, 33(a)				
Mailing address MAY BE A POST OFFICE BOX)					
. If amending the registered agent and/or registered office a	address on our records, enter the name of the new regist				
gent and/or the new registered office address here:					
Name of New Registered Agent:					
New Registered Office Address:					
Nen registered Office Address.	Enter Florida street address				
	Florida				
	, Florida				

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 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
			□Add
			□Remove
			□Change
			□Add
			□ Remove
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Effective date, if other than the fan effective date is listed, the date man Note: If the date inserted in this document's effective date on the	ust be specific block does n	eand cannot ot meet the	be prior to a applicable	date of filing	or more that	(op in 90 days a uirements,	fter filing.) F	ursuar ill not	nt to 60 be lis)5.0207 () sted as th
e record specifies a delayed effect rd is filed.	ive date, but	not an effe	ective time	:, at 12:01 a	a.m. on the	earlier of:	(b) The	90th d	ay aft	er the
October 02		2020	<u>)</u>	. -						
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Filing Fee: \$25.00