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(Re	questor's Name)	
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COVER LETTER

TO:	Registration Sec Division of Corp			
CUDIE		EALTH LLC		
SORIC	CT:	Name of Limit	ted Liability Company	
		Amendment and fee(s) are subundence concerning this matter t		
ricase	etuin an correspoi	RICARDO DOMINGUEZ	o the following.	
		AMRICK HEALTH LLC	Name of Person	
		2904 sw 92nd court	Firm/Company	
		Miami, FL 33165	Address	
		rdomi006@gmail.com	City/State and Zip Code	
For fur	ther information co	E-mail address: (to concerning this matter, please ca	o be used for future annual report notifi	cation)
	o Dominguez	, p	786 368-4960	
	Name of	l Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
■ \$2:	5.00 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

AMRICK HEALTH LLC			FII.	FD ·
(Name of the Lim	ited Liability Co (A Florida Lim	ompany as it now appear ited Liability Company)	rs on our records.)	
Florida document number L18000004034	·	oany were filed on 1/4	44. CHE (M.A.)	ひに むしみこと
(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 the Articles of Organization for this Limited Liability Company were filed on the Articles of Organization for this Limited Liability Company were filed on the Articles of Organization for this Limited Liability Company were filed on the Articles of Organization for this Limited Liability Company were filed on the Articles of Organization for this Limited Liability Company were filed on the Articles of Organization for this Limited Liability Company were filed on the Articles of Organization for this Limited Liability Company were filed on the Articles of Organization for the Articles of the Indiana for the new name of the Imited Liability Company for the designation for the abbreviation for the Articles of the Indiana for the NOT APPLICABLE for the Articles of the Indiana for the Organization for the Indiana for the I				
A. If amending name, enter the new name of	of the limited	liability company he	ere:	
AMRICK INVESTMENT GROUP LLC				
The new name must be distinguishable and contain the	words "Limited I	Liability Company," the d	esignation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		NOT APPLICA	BLE	
Principal office address MUST BE A STREE	ET ADDRESS	<u> </u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	NOT APPLICA	BLE	
			our records, <u>en</u>	ter the name of the nev
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Enter Flor	ida strect address	
	N/A		, Florida	N/A
		City		Zip Code

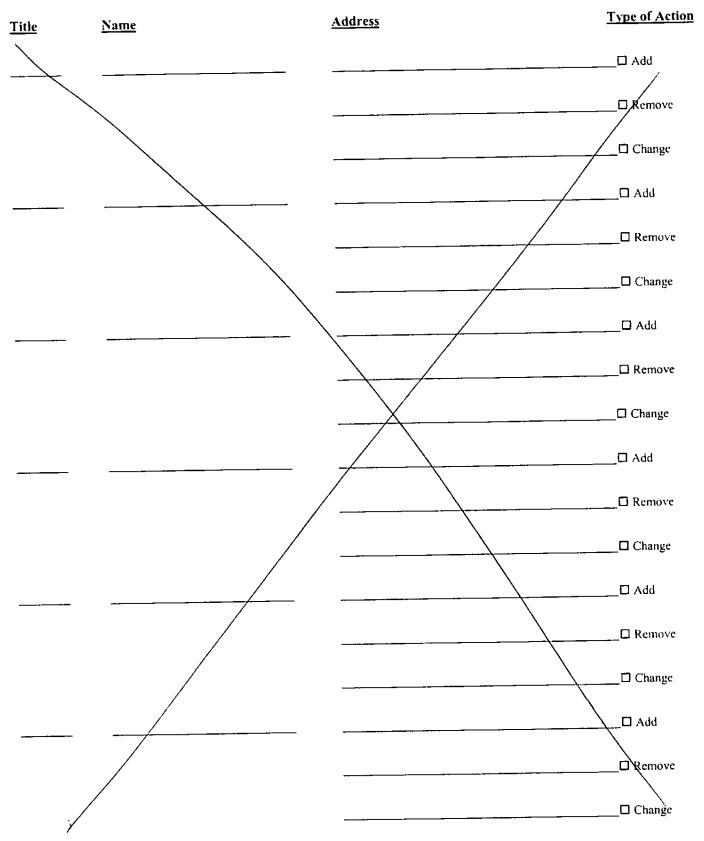
New Registered Agent's Signature, if changing Registered Agent:

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

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



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Effective date,	if other than the date	of filing:	(optional)	
If an effective date	is listed, the date must be sp	pecific and cannot be prior to date	of filing or more than 90 days after filing.) Pursuant to 60 atutory filing requirements, this date will not be list	5.0207
	ctive date on the Departr		natory timing requirements, this date will not be its	ieu as
	cifies a delayed effe by after the record i		ffective time, at 12:01 a.m. on the earli	ier of:
Dated	JULY 4	2019		
	/ Hend	CHan-		

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee