# L18000016098

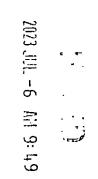
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		•	COVER LETTER	
TO:	Registration Sec Division of Corp			, . <sup>16</sup>
, cuái	STUART H	EALTHCARE HOLDING LL	.C	
SOBI	ECI:	EALTHCARE HOLDING LL Name of Lim	ited Liability Company	
The ei	nclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Michael Bernstein		
			Name of Person	
		The Bernstein Law Firm	Name of Person  Firm/Company  ard, Suite 950  Address  City/State and Zip Code  s: (to be used for future annual report notification)	
		Name of Person  The Bernstein Law Firm  Firm/Company  10800 Biscayne Boulevard, Suite 950  Address		
		10800 Biscayne Boulevard	l, Suite 950	
			Address	
		Miami, Florida 33161		
			City/State and Zip Code	
		michael@blfmiami.com		
			-	ication)
For fu	rther information co	oncerning this matter, please ca	all:	
Mich	ael Bernstein		at (	
	Name of	Person	Area Code Daytime	· Telephone Number
Enclo:	sed is a check for th	e following amount:		
□ s:	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 Address:

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

# THE BERNSTEIN LAW FIRM

## Attorneys and Counselors at Law

10800 Biscayne Blvd, Suite 950, Miami, FL 33161 Telephone: (305) 672-9544 Fax: (305) 672-4572

Michael I. Bernstein, Esq. Jordan C. Kaplan, Esq.

Matthew Savino, Esq. (of counsel)

Email: michaeláðblfmiami.com Email: jordan@blfmiami.com Email: matthew@blfmiami.com

#### Via Mail

Florida Department of State **Division of Corporations** 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

STRUART HEALT!ICARE HOLDING LLC and PSL REHABLITATION AND Re:

HEALTHCARE LLC.

Whomever it may concern.

I hope this letter finds you well. Enclosed here are 3 corporations and a check of ninety dollars (\$90.00) for each corporations filing.

PLEASE GOVERN YOURSELVES ACCORDINGLY.

THE BERNSTEIN LAW FIRMS

Michael I. Bernstein For the Firm

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STUART HEALTHCARE HOLDING LLC

2023 JUL -6 AM 9: 49

(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  $\frac{01/18/2018}{1}$ and assigned Florida document number L18000016098 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: . 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

#### 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
MGR	Eli Strobli	17001 NE 6 AVE	
		NORTH MIAMI BEACH, FL 33162	<b>≡</b> Remove
		**************************************	□Change
MGR	BRIGHTSNFCARE, LLC	17001 NE 6 AVE	<b>≣</b> Add
		NORTH MIAMI BEACH, FL 33162	□Remove
			Change
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