

L18 000022205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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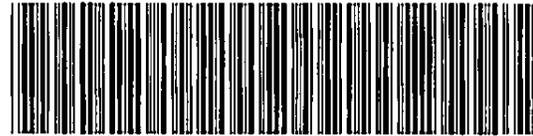
(Business Entity Name)

(Document Number)

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FILED
19 APR -8 PM 5:10
TALLAHASSEE, FLORIDA

APR 13 2019
S. YOUNG



ERIC P. GROS-DUBOIS, Esq.
MIAMI OFFICE: (786) 837-6787
D.C. OFFICE: (202) 900-2818
WEST PALM BEACH: (561) 461-0700
E-MAIL: ERIC@EPGDLAW.COM

April 3, 2019

VIA ELECTRONIC FILING

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

RE: ARTICLES OF AMENDMENT – MENTIS GROUP LLC
Document Number: L18000022205

Dear Sir or Madam:

Enclosed please find executed Articles of Amendment for Mentis Group LLC. Should you have any questions or concerns regarding anything in this letter, please do not hesitate to contact our office at the address or phone number provided herein.

Best Regards.

A handwritten signature in black ink, appearing to read 'Eric P. Gros-Dubois', written over a horizontal line.

Eric P. Gros-Dubois, Esq.
For the Firm

Enclosures
GD

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Mentis Group, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eric P. Gros-Dubois, Esq.

Name of Person

EPGD Attorneys at Law, P.A.

Firm/Company

777 S.W. 37th Avenue, Ste. 510

Address

Miami, FL 33135

City/State and Zip Code

eric@epgdllaw.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric P. Gros-Dubois, Esq.

786 837-6787
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Mentis Group, LLC

(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 January 24, 2018 and assigned Florida document number L18000022205.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

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:

N/A

New Registered Office Address:

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Maryland Health Care, LLC	2830 16th ST., N.E. Apt. 37	<input checked="" type="checkbox"/> Add
		Hickory, NC 28501-8608	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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