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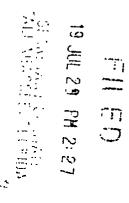
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COVER LETTER

Divi	ision of Cor	porations		
SUBJECT:	EDGEWAT	TER MEDICAL GROUP LLC		
Sonate 1.		Name of Lin	nted Liability Company	
The enclosed	Articles of .	Amendment and fee(s) are sub	unitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		ANDREA K. HUGHES		
			Name of Person	
		EDGEWATER MEDICAL	L GROUP LEC	
EDGEWATER MEDICAL GROUP LLC Firm/Con 506 NORTH RIDGEWOOD AVENUE Addres EDGEWATER, FL 32132 City/State and kelly@edgewatermedical.health E-mail address: (to be used for fun For further information concerning this matter, please call: ANDREA KELLY HUGHES 305	Firm/Company			
		506 NORTH RIDGEWOO	DD AVENUE	
			Address	
		EDGEWATER, FL 32132		
		kelly@edgewatermedical.hd	City/State and Zip Code ealth	
		E-mail address: (to be used for future annual report notifi-	cation)
For further in	formation co	oncerning this matter, please ea	all:	
ANDREA K	ELLY HUG	HES		
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25,00 Fi	ling 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:

TO:

Registration Section

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

EDGEWATER MEDICAL GROUP L	LC		
(Name of the Limited)	Liability Company as it now appears (Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liab Florida document number <u>L18000037459</u>	ility Company were filed on 02/09		md assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability company here	<u>:</u> :	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the des	ignation "LLC" or the abbrevia	tion "L.L.C."
Enter new principal offices address, if applicable	e:		ii
(Principal office address MUST BE A STREET)	ADDRESS)	1.5	<u>. = .</u>
	.	35 20 20 20	2 P.
Enter new mailing address, if applicable:		72.7	~- iò
(Mailing address MAY BE A POST OFFICE BC	<u> </u>	<u> </u>	<u>8</u>
B. If amending the registered agent and/or registered agent and/or the new registered offic Name of New Registered Agent: New Registered Office Address:		our records, <u>enter the</u>	<u>na</u>
	Enter Floridi	i street address	
-	City	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 a provisions of all statutes relative to the proper and complete performance of my duties, and I at accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. being filed to merely reflect a change in the registered office address, I hereby confirm that the company has been notified in writing of this change.

If Changing Registered Agent, Sr

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	MICHAEL E. JOHNSON	506 N. RIDGEWOOD AVENUE EDGEWATER, FL 32132	⊟ Add
			□ Remove
			Change
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E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the (b) The 90th day after the record is filed.						_
67/23/2019 E. Effective date, if other than the date of filing:						_
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O7/23/2019 F. Effective date, if other than the date of filing:		27.74				
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F Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	4 9 (, n				_
67/23/2019 F. Effective date, if other than the date of filing:						
E. Effective date, if other than the date of filing:						
E. Effective date, if other than the date of filing:	<u></u>	- 3				
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	27	(optional)	(option	r than the date of filing:	ive date, if oth	. Effectiv
	be listed :	s after filing.) Pursuant s, this date will not b	cable statutory filing requirements, this d	ed in this block does not mee	If the date insert	Note: 1
	earlier	01 a.m. on the ϵ	ot an effective time, at 12:01 a.r			
Dated 23 JULY 2019				():	23 JULY	D
Signature of a member or authorized representative of a member			·	APh		Datea _

Page 3 of 3

Filing Fee: \$25.00