## L18000105435

(Req	uestor's Name	)
(Add	ress)	
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Cold State College

OCT 24 2020

### **COVER LETTER**

Division of Corp		. •	. •
subject: <u>Pal'm</u>	Beach Su Name of Lim	rgical Suites,	LLC
	Amendment and fee(s) are sub		
	Robi	Name of Person	
	Palm Bea	ch Surgical.	Suites, LLC
		Address	seite 150
	Palm Bear rcoldo E-mail address: (1	City/State and Zip Code  Palm blach S  to the used for future annual report notifi	FL 3340 Scirg - COM cation)
For further information co	ncerning this matter, please ca	l all:	Ü
Robin Name of	Cold	at (566) - 508	-2736 Telephone Number
Enclosed is a check for the	e following amount:		
\$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		Street Address:	

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

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF Palm Roach Surgical Serial 1950.

(Name of the Limite	ed Liability Company as it/nov A Florida Limited Liability Co	a appears on our records.)	<u> </u>
The Articles of Organization for this Limited Lie Florida document number <u>L1800010</u> 4		i on April 26,	2018 and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability comp	pany here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Compan	ry," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applica	ıble:		
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u></u>		
B. If amending the registered agent and/or reagent and/or the new registered office addres	_	n our records, enter the	name of the new registered
Name of New Registered Agent:	Robin	Cold	
New Registered Office Address:	E	inter Florida street address	
	City	, Florid	la
	City		zip Coac

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 = A	uthorized Member	•	
<u>Title</u>	<u>Name</u>	Address 4 JS - 12 Julius	Type of Action
mor_	Berner, Stacey Dr.	722 Dulaney Valley Read	□Add
		Towson, MD	
		21204	Change
other	Mason, Heather	4215 Burns Road #150	□Add
		Palm Beach Gardens, FL	XRemove
		33410-4625	_ □Change
			□Add
			Remove
			□Change
			□Add
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			□Change
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			Remove
			□Change

Effective date, if other than the date of filing:  fan 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 to 605.02  Store: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The effective date and the department of the effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the distribution of the earlier					15 .	·];	= 5	
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Signature of a member or authorized representative of a member	Dated Stp		1	Add				
		Sign	ature of a member or a	uthorized représenta	itive of a me	mber		

Filing Fee: \$25.00