

L180000247526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

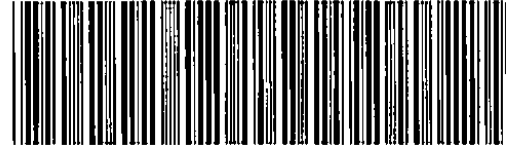
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



50034390083

5
0
3
4
3
9
0
0
8
3

05/04/20--01041--016 *

AM
5/22/20

TO: Registration Section
Division of Corporations

SUBJECT: NOEL PODIATRY, PLLC
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:

JAMES F Noel
Name of Person

NOEL PODIATRY, PLLC
Firm/Company

2172 W. NINE MILE RD #212
Address

PENSACOLA, FL 32534
City/State and Zip Code

drjnoel8@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James F Noel at (843) 773-1846
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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:
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

ARTICLES OF ORGANIZATION
OF

NOEL PODIATRY, PLLC

2020 MAY -4 AM

(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 10/23/2018 and Florida document number L18000247526

This amendment is submitted to amend the following:

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

KINETIC COMFORT, PLLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation

Enter new principal offices address, if applicable:

2172 W. Nine Mile Rd

(Principal office address MUST BE A STREET ADDRESS)

#212

Pensacola, FL 32534

Enter new mailing address, if applicable:

2172 W. Nine Mile Rd

(Mailing address MAY BE A POST OFFICE BOX)

#212

Pensacola, FL 32534

B. If amending the registered agent and/or registered office address on our records, enter the name of the agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

2172 W. Nine Mile Rd #2

Enter Florida street address

Pensacola

City

Florida

32534

Zip Co

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 all 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

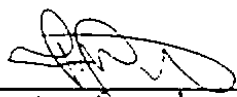
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

E. Effective date, if other than the date of filing: 20 MAY 2020 (optional) at 1a
(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 to **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 earlier of: (b) The 90th day record is filed.

Dated 4/29/2020 1334



Signature of a member or authorized representative of a member

JAMES FITZGERALD NOËL

Typed or printed name of signee