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(Requi	estor's Name)	
(Addre	ess)	
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(City/S	itate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
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Amend Many

NOV 1 9 2018 I ALBRITTON

COVER LETTER

	Registration Sec Division of Corp		-	•
SHEE		e, MD Surgical Services, LLC		
SUBJEC	1	Name of Lim	nited Liability Company	
The enclo	sed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspor	ndence concerning this matter	to the following:	
		Thom Rogers, JD CPA		
			Name of Person	
		Sweetwater Law Offices,	PLC	
			Firm/Company	
		900 Fox Valley Drive, Sui	ite 102	
			Address	· - -
		Longwood, FL 32779		
			City/State and Zip Code	
		thom@sweetwaterlaw.com		
		E-mail address: (to be used for future annual report notif	cation)
For furthe	er information co	ncerning this matter, please c	all:	
Thom Ro	gers, JD CPA		407 869-1680 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	is a check for the	e following amount:		
□ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2018 HOV 2 PM 12: E.

George Pope, MD Surgical Services, 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 I	Liability Company	y were filed on 10/26/2018	and assigned
Florida document number L18000252624	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	oility company here:	
George Pope MD Emergency Services, LLC			
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	3872 Oakwater Circle, S	Suite B, Orlando, FL 32806
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		3872 Oakwater Circle, S	Suite B, Orlando, FL 32806
(Mailing address MAY BE A POST OFFICE	BOX)	******	<u> </u>
B. If amending the registered agent and registered agent and/or the new registered of	_		ecords, <u>enter the name of the nev</u>
Name of New Registered Agent:			
New Registered Office Address:	3872 Oakwate	er Circle, Suite B	
		Enter Florida street	t address
	Orlando		, 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>	Name	Address	Type of Action
MGR	George Pope		Add
			□ Remove
		3872 Oakwater Circle, Suite B, Orlando, FL 32806	☐ Change
			Add
			Remove
			☐ Change
			Add
			☐ Remove
			□ Change
			Add
			☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			Add
			C Remove
			Change.

· 			
		<u>-</u> .	<u> </u>
	 .	<u></u>	
			.
			
	1/1/2019		<i>(</i>
e: If the date inserted in this	must be specific and cannot be prior to s block does not meet the applica e Department of State's records.	o date of filing or more than 90 of ble statutory filing requireme	_ (optional) ays after filing.) Pursuant to 605.020 ents, this date will not be listed a
record specifies a delay he 90th day after the r	yed effective date, but not record is filed.	an effective time, at 1	2:01 a.m. on the earlier o
November 1	, 2018	<u> </u>	
	Thom Rogers Signature of a member or author	JD CPA	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00