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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HEALTH COACH DIRECT PRIMARY CARE PRACTICE PLLC

Certificate of Status	0
Certified Copy	1
Page Count	06
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TO:

Registration Section

COVER LETTER

2020-03-11 07:29:13 PDT

Divi	ision of Corp	orations			
		OACH DIRECT PRIMARY CA	ARE PRACTICE PLLC		
SUBJECT:		Name of Limite	d Liability Company	<u> </u>	. .
The enclosed	I Articles of A	Amendment and fee(s) are subm	itted for filing.		
Please return	all correspor	idence concerning this matter to	the following:		
		Cheyenne Moseley			
			Name of Person		
		Legalzoom.com, Inc.			
			Firm/Company		
		101 N Brand Blvd 11th Fl			
	Address				
		Glendale, CA 91203			
			City/State and Zip Code		-
		margarette.jerome@gmail.co			
		E-mail address: (to	n be used for future annual	report notification	on)
For further	information c	oncerning this matter, please ca	li:		
Cheyenne !	Moseley		800 77	73-0888	
	Name o	f Person	Area Code	Daytime Tel	ephone Number
Enclosed is	a check for the	he following amount:			
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy (additional copy is en		S60.00 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

HEALTH COACH DIRECT PRIMARY CARE PRAC				
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) inhility Company)			
The Articles of Organization for this Limited Liability Company		and assigned		
Florida document number 11/06/2018		10 <u>2</u>		
This amendment is submitted to amend the following:	2020 MAR SCON TANK			
A. If amending name, enter the new name of the limited liab	ility company here:			
		,		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LI.C" or t	he abhreviation LL.C.		
	12300 Alternate Hwy A1A, Stc. 10	6		
Enter new principal offices address, if applicable:	Palm Beach Gardens, FL 33410	<u> </u>		
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12300 Alternate Hwy A1A, Stc. 106 Palm Beach Gardens, FL 33410			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	Mice address on our records, <u>e</u>	nter the name of the	1 <u>ev</u>	
Name of New Registered Agent:			-	
New Registered Office Address:	Enter Florida street address	<u> </u>	-	
	771	1.		
	City , Florid	18Zip Code	-	
and the state of t				

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
AMBR	Margarette Jerome		D Add
			□ Remove
		12300 Alternate Hwy A1A, Ste. 106 Palm Beach Gardens, FL 33410	🖶 Change
			O Ald
			Change T
			——— □ Add □ □ □ OS □ □ Remove
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Page 7 of 7	2020-03-11 07:29:13 PDT	LegalZoom.com, Inc. From: Sarah Ace
D. If amending any other informati	on, enter change(s) here: (Attach additional sh	neets, if necessary.)
		2020 HAR
		AR T
·		700 D 124
,,		$r \geq \omega$
		1:1
		-
E. Effective date, if other than the	lute of filing:	(optional)
(If an effective date is listed, the date must	be specific and cannot be prior to date of filing or more that ck does not meet the applicable statutory filing requ	n on days after filing.) Puistant to 603.0207 (3)(0
If the record specifies a delayed (b) The 90th day after the reco	effective date, but not an effective time, rd is filed.	at 12:01 a.m. on the earlier of;
Dated 3/3/8030	· · · · · · · · · · · · · · · · · · ·	
Morganette fl.	ארי איז און איז	en:ber

Page 3 of 3

Margarette Jerome

Filing Fee: \$25.00

Typed or printed name of signee