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December 30, 2019

ROYAL HEALTH & WELLNESS LLC 201 S 2ND ST STE 208 FT PIERCE, FL 34950

SUBJECT: ROYAL HEALTH & WELLNESS LLC

Ref. Number: L19000064458

We have received your document for ROYAL HEALTH & WELLNESS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 219A00026287

Yasemin Y Sulker Regulatory Specialist III

2020 J.E. 13 F.Y.I2: 0

www.sunbiz.org

COVER LETTER

TO:	Registration S Division of Co			
SUBJE	ROYAL	HEALTH & WELLNESS LLC		
SUBJE		Name of Lin	nited Liability Company	
The enc	losed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all corresp	ondence concerning this matter	to the following:	
		James P DuBELL		
			Name of Person	
		ROYAL HEALTH & WE	LLNESS LLC	
			Firm/Company	
		201 S. 2nd St. Ste 208		
			Address	4
		Ft. Pierce, FL 34950		
			City/State and Zip Code	
		jpdb757@aol.com	to be used for future annual report n	
r			·	otification)
For turti	ner information	concerning this matter, please of	ali:	
James P	DuBELL		239-776-9	656
	Name	of Person	· · · · · · · · · · · · · · · · · · ·	ine Telephone Number
Enclosed	d is a check for t	the following amount:		
■ \$25.	00 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

ROYAL HEALTH & WELLNES	SS LLC					
(Name of the Lin	A Florida Limited	iny as it now appears on ou Liability Company)	r records.)			
The Articles of Organization for this Limited Liability Company were filed on 03/06/2019 Florida document number						
his amendment is submitted to amend the fo	llowing:					
A. If amending name, enter the new name	of the limited liah	illty company here:				
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	on "LLC" or the abbrev	iation "L.L.C."		
nter new principal offices address, if appl	201 S. 2nd St. Ste 208 Ft. Pierce, FL 34950					
Principal office address MUST BE A STRE	ET ADDRESS)		·			
inter new ma ili ng address, if applicable: <u>Mailing address MAY BE A POST OFFICI</u>	<u>: BOX)</u>	201 S. 2nd St. Ste 208 I	Ft. Pierce, FL 34950	202		
3. If amending the registered agent and	tlar magistamed of	The eddson on		F 1 1.3		
egistered agent and/or the new registered of	office address here	e:	ecords, enter the	name of the		
Name of New Registered Agent:	James P DuBE	l.i.	<u> </u>	35 35		
New Registered Office Address:	201 S. 2nd St. Ste 208					
	C. Diames	Enter Florida stree				
	Ft. Pierce		, Florida <u>34950</u>			

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.

City

I Charging 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	RAHEEL NAVIWALA	124 N 2ND ST STE 9	
		FORT PIERCE, FL 34950	Remove
		201 S. 2nd St. Ste 208	Change
MGR	James P DuBELL	Ft. Pierce, FL 34950	B Add
			□ Remove
		·	Add
			П Remove
			Change
			□ Add
			□ Remove
			□ Change
			🖸 Add
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change

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(ii an eir <u>Note:</u>	ve date, if other than the date of filing:
he rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated _	MASSELL
	Signature of a member or authorized representative of a member
	James P. Du BELL

Page 3 of 3

Filing Fee: \$25.00