L19000076338

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2.11.11.11.11.11.11.11.11.11.11.11.11.11
(Document Number)
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COVER LETTER

TO: Registration Section
Division of Corporations

RGMDCLAYSURGERY LLC

RChyl	IXLATIONOINTELE		•
SUBJECT:	Name of Limit	ted Liability Company	
	,		
The enclosed Articles of a	Amendment and fee(s) are subr	nitted for filing.	PORTO A
	ndence concerning this matter t		
Picase return an correspo	referee concerning this matter t	o the following.	
	Rence Gallo		
		Name of Person	
		Firm/Company	
	8307 Riding Club Road		
		Address	
	Jacksonville, FL. US 3225	6	
		City/State and Zip Code	
	gallo.renee@gmail.com		
	E-mail address: (t	o be used for future annual report notific	ation)
For further information c	oncerning this matter, please ca	ill:	
Rence Gallo		786 897-5225	
Name o	f Person	at () Area Code Daytime	l'elephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fcc	☐ \$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 AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ARTICLES OF C	RGANIZATION	
· · · · · · · · · · · · · · · · · · ·	F	2
RGMDCLAYSURGERY LLC		(G)
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.)	
(A Florida Limited I		79
he Articles of Organization for this Limited Liability Company L19000076338	were filed on March 19, 2019	and assigned
lorida document number		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
RGMD Clay Surgery LLC		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	was now to the same of the sam	
(Principal office address MUST BE A STREET ADDRESS)	8307 Riding Club Road	
	Jacksonville, FL. US 32256	
Enter new mailing address, if applicable:	8307 Riding Club Road	
Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, FL. US 32256	
		···
3. If amending the registered agent and/or registered office a	ddress on our records, enter the i	name of the new registere
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	a
	City ,	aZip Code
lew Registered Agent's Signature, if changing Registered Agent:		
hereby accept the appointment as registered agent and agree rovisions of all statutes relative to the proper and complete ccept the obligations of my position as registered agent as p eing filed to merely reflect a change in the registered office ompany has been notified in writing of this change.	performance of my duties, and 1 corovided for in Chapter 605, F.S.	am familiar with and Or, if this document is
If Char	iging Registered Agent, Signature of Nev	w Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or retaoved from our records:

MGR =	Manager
AMDD -	A4 h a

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□ Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□ Пстюче
			Change
			☐Add
			□Remove
			□Change
			□ Add
			Пенюvе

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
f the recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
	0//29/7020
Dated	