L19000077448

(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



700338140577

12/30/19--01031--022 **25.00

R. WHITE
JAN 2 8 2020

1 30 FH 3: 02

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations			
SUBJECT: U.S.A.	UNITED SUICE Name of Limit	ited Liability Company	<u>L</u> C
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	JOHN	DuM4≤ Name of Person	
	U.S.A UNITE	Surgical Assis	tant's CLC
	745 Porta	Address	
	ST. AUGUS	FL 3209 City/State and Zip Code	2
	SNOWRIGE E-mail address: (t	e ImD & AGL - Com to be used for future annual report notifi	cation)
For further information co	ncerning this matter, please ca		
lahn	Dumas	211 586) 7/4	7252
Name of	Person	at (<u>586)</u> 764 Area Code Daytime	Telephone Number
Enclosed is a check for the	e 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 Se Division of Co	ection orporations	Street Address: Registration Sec Division of Corp	porations
P.O. Box 6327	•	The Centre of To	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

, 12 3: 02

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 4/19/2019 Florida document number L. [900077448] This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida City 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>	<u>Name</u>	Address	Type of Action
MGR	John Domas	3640 NEWCOMO RD #6	□ Adđ
		SLYONEUCOMO PDIE JACKSON	<u>l. (lf</u> ∏\$Remove
			□Change
			DAdd
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			🗀 Add
			□Remove
	· ·		□Change
			□Add
			□Remove
			□Change

	Plante Remain My NAME John Dumas Off This
_	BUSINESS ENTITY, INCluding For my NAME OFF THE
	FICTITIOUS NAME ASWELL.
_	
_	
_	
_	
-	
-	
_	
-	
-	
_	
_	
-	
(If an eff Note:	ve date, if other than the date of filing: 13/14/2019 (optional) ective 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 605,0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
he record ord is fil	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 ed.
Dated	12/16/2019
	12/16/2019 M. D. Martinest Signature of a member or authorized representative of a member
	John Dunas Typed or printed name of signee

Filing Fee: \$25.00