To.

Division of Corporations



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(((H190002523283)))



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Ta:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 126010600062 Phone : (323) 962-8600 : (323)962-3889 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address		 	 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNLIFE HEALING PLLC

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COVER LETTER

TO:	Registration Se Division of Cor			
CAND III		HEALING PLLC		
SUBJECT: Name of Limited Liability Company				
The ene	losed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please r	eturn all correspo	ondence concerning this matter to	o the following:	
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		101 N Brand Blvd Llth Fl		
			Address	
		Glendale, CA 91203		
			City/State and Zip Code	
		elarekorlando@gmail.com	be used for future annual report n	ostification)
Eas fact	ber information o	concerning this matter, please cal		
			800 773-0888	
Cheyenne Moseley Name of Person		at ()		
Enclose	ed is a check for f	he following amount:		
		☐ \$30,00 Filing Fee & Certificate of Status	■ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Smus & Certified Copy (additional copy is enclosed)
	Regist Divisio P.O. H	ING ADDRESS: ration Section on of Corporations 30x 6327 assee, FL 32314	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive	porations 2

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNLIFE HEALING PLLC			
(Name of the Limited Liability Compa- (A Florida Limited I	any as it now appears on our records.) Lubility Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000123738</u>	y were filed on 05/07/2019 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	nility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ility Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	122 North 4th Street		
(Principal office address MUST BE A STREET ADDRESS)	Lake Mary, Florida 32746		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	office address on our records, <u>enter the name of th</u> re:	 <u></u>	
Name of New Registered Agent:			
New Registered Office Address:	Enter Fioridastrea caldress	<u> </u>	
	, Florida		
New Registered Agent's Signature, if changing Registered Agent:	<u>ı:</u>		
I hereby accept the appointment as registered agent and aging provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	gree to act in this capacity. I further agree to comply we be performance of my duties, and I am familiar with and s provided for in Chapter 605, F.S. Or, if this documen	u	

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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

AMBR = Aut	horized Member		
Title	Name	Address	Type of Action
			DAJJ
			Remove
			Change
			O Add
			D Remove
			Change
			O Add
			🖸 Remove

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Filing Fee: \$25.00