

L19000158899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

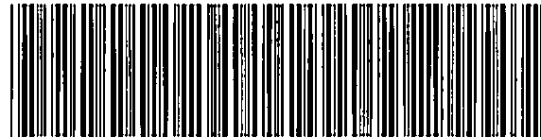
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700423690857

6D

RECEIVED

2024 FEB 26 PM 2:57

TALLAHASSEE, FLORIDA

FILED

2024 FEB 26 PM 3:05

STATE

AB

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NovaCare Health Services, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rebecca Heath

\_\_\_\_\_  
Name of Person

NovaCare Health Services, LLC

\_\_\_\_\_  
Firm/Company

3501 W. Vine St., Ste. 338

\_\_\_\_\_  
Address

Kissimmee, FL 34741

\_\_\_\_\_  
City/State and Zip Code

rebecca.heath@heathinfusions.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca Heath

407

780-4074

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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 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

FILED

2024 FEB 26 PM 3:05

FILED, and assigned  
JUNE 11

**If Changing Registered Agent, Signature of New Registered Agent**

1

**MGR = Manager**  
**AMBR = Authorized Member**

[illegible]

[illegible]

(If an effective 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)(b)

If the record 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 record is filed.

Rebecca Heath

Rebecca Heath

**Filing Fee: \$25.00**