

Division of Corporations

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L19000174958

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
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****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
BRANDYWINE HEALTH CENTER LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

2019 OCT-4 AM 10:40

2019 OCT-4 PM 2:12

Fax Audit H19000895811.3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brandywine Health Center LLC

(Name of 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 7/3/2019 and assigned
Florida document number L19000174958

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Kondrad Chiropractic LLC

The new name must be distinguishable and end with 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)

3220 Clark Road

Sarasota, FL 34231

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2209 Pinewood Circle

Naples, FL 34105

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

Zip Code

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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR - Manager

AMBR - Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (5)(b))

Dated: October 1st, 2019

KSKondr DC

Signature of a member or authorized representative of a member

Kristopher Kondrad, Member

Typed or printed name of signer

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