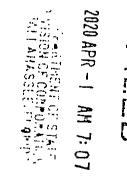
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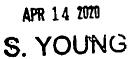
Office Use Only



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COVER LETTER

TO:

	PERTIES, LLC		
.1:	Name of Lim	ited Liability Company	
osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
turn all correspo	ndence concerning this matter	to the following:	
	David Hatton		
		Name of Person	
	David L. Hatton, P.A.		
		Firm/Company	
	2960 Wentworth		
		Address	
	Weston, FL 33332		
		City/State and Zip Code	·· ·
	dhatton@hattonlaw.com		· ·
			lication)
er information c	oncerning this matter, please co	all:	
atton		786	
Name o	f Person	Area Code Daytime	e Telephone Number
l is a check for th	ne following amount:		
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)
		Street Address: Registration Sec	ction
Division of C	orporations	Division of Cor	porations
			allahassee e Street, Suite 810
	er information e atton Name of Cortaining Address Registration S Division of C P.O. Box 632	Name of Lim Osed Articles of Amendment and fee(s) are sub turn all correspondence concerning this matter David Hatton David L. Hatton, P.A. 2960 Wentworth Weston, FL 33332 dhatton@hattonlaw.com E-mail address: (er information concerning this matter, please c latton Name of Person Lis a check for the following amount: 00 Filing Fee	Division of Corporations RLH PROPERTIES, LLC Name of Limited Liability Company need Articles of Amendment and fee(s) are submitted for filing. turn all correspondence concerning this matter to the following: David Hatton Name of Person David L. Hatton, P.A. Firm/Company 2960 Wentworth Address Weston, FL 33332 City/State and Zip Code dhatton@hattonlaw.com E-mail address: (to be used for future annual report not) er information concerning this matter, please call: atton Name of Person Ten all address: (to be used for future annual report not) er information concerning this matter, please call: atton Name of Person Ten all address: (to be used for future annual report not) er information concerning this matter, please call: atton Name of Person Ten all address: Registration Section Division of Corporations P.O. Box 6327 The Centre of Ten and Ten a

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RLH Properties, LLC		202
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	<u>e as it now appears on our records.</u>) ability Company)	7020 APR
The Articles of Organization for this Limited Liability Company w Florida document number <u>L19000190246</u>	vere filed on <u>07/24/2019</u>	Frand assigned
This amendment is submitted to amend the following:		7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
A. If amending name, enter the new name of the limited liability	ty company here:	· <u>*</u>
The new name must be distinguishable and contain the words "Limited Liability Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		or the abbreviation "L.L.C."
Trincipal vijite anarem regiri pe ji viriteje rimining		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, <u>enter th</u>	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my duties, and ovided for in Chapter 605, F.	I am familiar with and S. Or, if this document is

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>	<u>Address</u>	Type of Action
MGR	WSOP Services, LLC	600 W. HILLSBORO BLVD STE 300	
		DEERFIELD BEACH, FL 33441	=Remove
			□Change
MGR	Tampa Bay Treatment Associates, LLC	600 W. HILLSBORO BLVD STE 300	= Add
	Associates, LLC	DEERFIELD BEACH, FL 33441	□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
		<u> </u>	□Change

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ective date, if other than the effective date is listed, the date made: If the date inserted in this cument's effective date on the	ust be specific and ca block does not mee	annot be prior to d et the applicable	late of filing or more	than 90 days after fib	ng.) Pursuant to 605.020
ecord specifies a delayed effect s filed.	ive date, but not ar	i effective time.	, at 12:01 a.m. on t	he earlier of: (b)	The 90th day after the
March 16		2021			
	;				
	Dan Let	+AA	-		

• . .

Filing Fee: \$25.00