

LI9 000 215051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

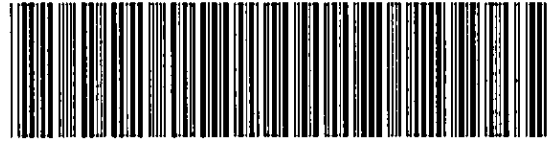
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15/29/20--01009--014 **25.00

2020 JUN 29 PM 4:19

C. GOLDEN

JUN 17, 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cobra Surgical 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:

TERENCE P. GOWEN

Name of Person

Cobra Surgical LLC

Firm/Company

882 41ST AVE N.

Address

St. Petersburg FL 33703

City/State and Zip Code

TERRY@TPGOWEN@GMAIL.COM.

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

For further information concerning this matter, please call:

TERRY GOWEN

Name of Person

at (225)

Area Code

505-4752

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Cobra Surgical LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2020 11 29 PM 4:19

The Articles of Organization for this Limited Liability Company were filed on 11/01/2019 and assigned Florida document number 419000215051.

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 "L.L.C."

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:

TERRANCE P. GOWAN

New Registered Office Address:

882 41st Ave N.

Enter Florida street address

St. Pete Fl

City

Florida

33703

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Karla A Bowen</u>	<u>882 41st Ave N.</u>	<input type="checkbox"/> Add
		<u>St. Pete Fl.</u>	<input checked="" type="checkbox"/> Remove
		<u>33703</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>TERRANCE P. Bowen</u>	<u>882 41st Ave N.</u>	<input checked="" type="checkbox"/> Add
		<u>St. Pete Fl.</u>	<input type="checkbox"/> Remove
		<u>33703</u>	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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.

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