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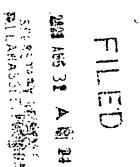
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Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### 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

Top Healtwase S  (Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)  Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:	1//	
(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 a agent and/or the new registered office address here:	address on our records, enter the name	of the new registered
Name of New Registered Agent:	- <del>-                                  </del>	
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 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>	Name	Address	Type of Action
<u>manager</u>	Haley S. Jeffers	W commercial Blud suite 190	B_ □Add
	V	Tamarac, FL, 33319	
			□ Change
m <u>onager</u>	Alan Guerra	3303W commercial Blvd 190B	🗆 Add
		Tamarac, Fl. 33319	XRemove
			□Change
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			Remove
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an effe <u>ote:</u>	ve date, if other than the date of filing:
record is file	I 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 ed.
ited _	August 13th, 2020.
	Signature of a member or authorized representative of a member
	John Mahaney