

LZ0 0000079690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

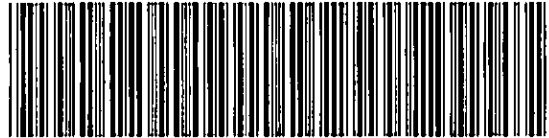
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800359850788

02/16/21--01020--011 **25.00

2021 FEB 16 AM 7:53

O SIMMONS
APR 06 2021

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 4F health and research 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:

John Secunda

Name of Person

4F health and research LLC

Firm/Company

571 SE 12 CT

Address

Pompano Beach, Florida 33060

City/State and Zip Code

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

For further information concerning this matter, please call:

John Secunda

954
at (_____) _____

782-2285

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

STEPS IN THE SAND LLC

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

2021 FEB 16 AM 7:53

The Articles of Organization for this Limited Liability Company were filed on 10/19/2020 and assigned
Florida document number L2000079690.

This amendment is submitted to amend the following:

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

4F health and research LLC

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)

571 SE 12 CT

Pompano Beach, Florida 33060

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

571 SE 12 CT

Pompano Beach, Florida 33060

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

2021 FEB 16 AM 7:53

Scenario	Initial State	Final State	Operations
Scenario 1	Initial State	Final State	<input type="checkbox"/> Add
	Initial State	Final State	<input type="checkbox"/> Remove
	Initial State	Final State	<input type="checkbox"/> Change
Scenario 2	Initial State	Final State	<input type="checkbox"/> Add
	Initial State	Final State	<input type="checkbox"/> Remove
	Initial State	Final State	<input type="checkbox"/> Change
Scenario 3	Initial State	Final State	<input type="checkbox"/> Add
	Initial State	Final State	<input type="checkbox"/> Remove
	Initial State	Final State	<input type="checkbox"/> Change
Scenario 4	Initial State	Final State	<input type="checkbox"/> Add
	Initial State	Final State	<input type="checkbox"/> Remove
	Initial State	Final State	<input type="checkbox"/> Change
Scenario 5	Initial State	Final State	<input type="checkbox"/> Add
	Initial State	Final State	<input type="checkbox"/> Remove
	Initial State	Final State	<input type="checkbox"/> Change
Scenario 6	Initial State	Final State	<input type="checkbox"/> Add
	Initial State	Final State	<input type="checkbox"/> Remove
	Initial State	Final State	<input type="checkbox"/> Change
Scenario 7	Initial State	Final State	<input type="checkbox"/> Add
	Initial State	Final State	<input type="checkbox"/> Remove
	Initial State	Final State	<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Only changing name of business from STEPS IN THE SAND LLC to 4F health and research LLC

2021 FEB 16 PM 7:53

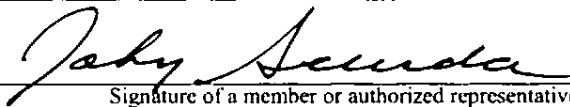
E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated 2/10 2021



Signature of a member or authorized representative of a member

John Secunda

Typed or printed name of signee

Filing Fee: \$25.00