

L20 000093469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

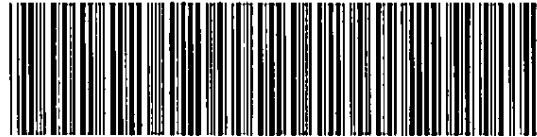
(Business Entity Name)

(Document Number)

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05/01/20--01020--005 **25.00

2020 MAY -1 PM 2:34

am
5/18/20

To whom it may concern:

We submit this amendment to you
As:

- 1) correct the spelling of Mr. Matthew
Akins name;
- 2) Add three (3) additional Managers
 - Robert C. Britts
 - Melvin A. Foley
 - Nicklaus A. Thearmon
- 3) Change Registered Agents Name from
Donald MacInay to Melvin
A. Foley.

- Should you have any further question
or need any additional information
please do not hesitate to contact me
personally at (813) 310-4271.

- Thanks you for your time
Melvin A. Foley

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MedActive Partners, 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:

Melanie A. Foley

Name of Person

MedActive Partners, LLC

Firm/Company

8364 Forest Oaks Boulevard

Address

Spring Hill, FL 34606

City/State and Zip Code

Melaniet@medactive.com

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

For further information concerning this matter, please call:

Melanie A. Foley

813 310 -4271

at (_____) _____

Name of Person

Area Code

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**

MedActive Partners, 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 3/3/20 and assigned Florida document number L2000093469.

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:

Melanie A. Foley

New Registered Office Address:

915 N. Franklin Street, Unit 2305

Enter Florida street address

Tampa

City

Florida 33602

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

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>	<u>Type of Action</u>
MGR	Robert C. Britts	4515 S. Renellie Drive	<input checked="" type="checkbox"/> Add
		Tampa, FL 33611	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Melanie A. Foley	15602 Indian Queen Dr.	<input checked="" type="checkbox"/> Add
		Odessa, FL 33556	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Nicklaus Q. Lenamon	12283 Padron Blvd.	<input checked="" type="checkbox"/> Add
		Spring Hill, FL 34609	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Matthew C. Akins	915 N. Franklin Street	<input checked="" type="checkbox"/> Add
		Unit 2395	<input type="checkbox"/> Remove
		Tampa, FL 33602	<input type="checkbox"/> Change
MGR	Matthew Aikens	915 N. Franklin Street	<input type="checkbox"/> Add
		Unit 2395	<input checked="" type="checkbox"/> Remove
		Tampa, FL 33602	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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 April 12, 2020

Meli G. Folz
Signature of a member or authorized representative of a member

Melanie A. Foley

Typed or printed name of signee