120000 136295

(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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S. YOUNC

COVER LETTER

TO: Registration Section Division of Corporation			
SUBJECT: New	Age Heat	thate LLC ited Liability Company	
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
		orey Tiger	
	New A	ge Healthcare	LLC
		E 65th Street	
	_ Fort La	uderdale, FL City/State and Zip Code	33308
-	Sales @ 1 E-mail address: (1	rewage hearth 1100 be used for future annual report not	C-COM_fication)
For further information cone	erning this matter, please ca	dl:	
Corey T	iger	at (<u>954)</u> <u>254</u> . Area Code Daytim	4321 e Telephone Number
Enclosed is a check for the f	ollowing amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

New Age Hea	althcare LLC	~1
(<u>Name of the Limited Liability Co</u> (A Florida Limi	ompany as it now appears on our records.) ited Liability Company)	1020
The Articles of Organization for this Limited Liability Comp Florida document number <u>L20000136295</u> .	pany were filed on May 19, 2020:	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	21
Tiger Health S		
The new name must be distinguishable and contain the words "Limited L	Liability Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	2401 NE 65th	Street #200
(Principal office address MUST BE A STREET ADDRESS	so Fort Lauderdale, f	-L 33308
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our records, <u>enter the name o</u>	f the new registered
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

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>	Address	Type of Action
MM_	Andrew Powell	251 NW 92 AUC	
		CORAL Springs Fl. 330	971Kemove
			(L'Change
MM	Corey Tiger	2401 NE 65" St U-	
r	Fort LAUdendAls Fl. 33.	308 □Remove	
			IChange
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
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(If an effe	we date, if other than the date of filing: 710000 (optional) ctive 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
ord is file	
Dated_	7/9/2020 2020.
	Signature of a member or authorized representative of a member
	Corey Tiger

Filing Fee: \$25.00