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DATE: 3/9/2021

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NAME: LEJEUNE RENAL CENTER LLC

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TYPE OF FILING: AMENDMENT

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AUTHORIZATION: ABBIE/PAUL HODGE

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ART	ICLES OF O O	RGANIZATION F	τα ατα το
	÷	- 2021 NAD	
LEJEUNE RENAL CENTER LLC			-9 AM 9:40
	ed Liability Compa	ny as it now appears on our liability Company)	
	(A Florida Limited L	liability Company)	1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -
The Articles of Organization for this Limited Li	ability Company	were filed on 06/23/2020	and assigned
	aonity company		Ind doinghed
Florida document number L20000168918	·		
This amendment is submitted to amend the follo	owing:		
	-		
A. If amending name, <u>enter the new name of</u>	<u>f the limited liabi</u>	<u>lity company here</u> :	
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able	7900 NW 27th Avenue,	Suite# F10-11, Miami, FL, 33147
(Principal office address MUST BE A STREE	<u>I ADDKESS)</u>		
Enter new mailing address, if applicable:		7900 NW 27th Avenue,	Suite# F10-11, Miami, FL, 33147
(Mailing address MAY BE A POST OFFICE BOX)			
		·	
B. If amending the registered agent and/or r	egistered office a	ddress on our records,	enter the name of the new registered
agent and/or the new registered office addres		, , , , , , , , , , , , , , , , , , ,	<u>_</u>
Name of New Registered Agent:	Dairy Camejo Hernandez		
	7900 NW 27th	Avenue, Suite# F10-11	
New Registered Office Address:	Enter Florida street address		
	Miami		, Florida
		City	, F Kir Kla Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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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, <u>signature of New Registered Agent</u>

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	2021 HAR - 9 AH 9: 40	Type of Action
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Note: If the date inserted in	ate must be specific and cannot be prior to date of	(optional) filing or more than 90 days after filing.) Pursuant to 605.0207 (atory filing requirements, this date will not be listed as t
document a cricou vo date on		
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