120000211310

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400410560414

06/16/23--01023--006 **25.00

7"3, "" IS 7"III: 57

COVER LETTER

TO:

TO: Registration Se Division of Cor			
The Anesth	etic, LLC		
SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Nicole Newmyer		
		Name of Person	
	The Anesthetic, LLC		
		Firm/Company	
	7251 Heather Sound Loop		
		Address	
	Wesley Chapel, FL 33545		
	-	City/State and Zip Code	I notification)
	nbnewmyer1423@gmail.com	·	
	E-mail address: (to be used for future annual report notification)	 :
For further information c	oncerning this matter, please ca	all:	, 1
Nicole Newmyer		407 312-8779	
Name	f Person	at ()	
name o	i rerson	Area Code Daytime Telephone Number	ان ان
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Certified Copy (additional copy is enclosed) Certified Co (additional copy Certified Co (additional copy Certified Co (additional copy Certified Co	of Status & opy
Mailing Address		Street Address:	
Registration S Division of C		Registration Section Division of Corporations	
P.O. Box 632	-	The Centre of Tallahassee	
Tallahassee,	FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Anesthetic, LLC	
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited Liability Company were filed on	07/28/2020 and assigned
Florida document number L20000211310	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	-3
(Principal office address MUST BE A STREET ADDRESS)	<u></u> _
	Ξ:
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	r records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	
Enter F	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>	<u>Address</u>	Type of Action
AMBR	Jason Newmyer	7251 Heather Sound Loop, Wesley Chapel, FL 33545	_ ≣ ∧dd
			□Remove
			_ Change
			_ 🗆 Add
			_ □Remove
			_ □Change
			□ Add
		<u> </u>	□Remove
			Change
			_
		··	 _ □Remove
			_ DChange
			□ Add
			□Remove
			_ □Change
			🗆 Add
			Remove
			_ Change

			· · · · · · · · · · · · · · · · · · ·	
	<u> </u>			
4-7			· · ·	
				
	· .			
	· · · · · · · · · · · · · · · · · · ·			
+				
				-
				· · · · · · · · · · · · · · · · · · ·
			-	
Sective date, if other than the da	ate of filing:		(ontion	al)
fective date, if other than the da in effective date is listed, the date must be	e specific and cannot be prio	r to date of filing or more	than 90 days after fil	ing.) Pursuant to 605.020
ote: If the date inserted in this block current's effective date on the Department.			equirements, this d	ate will not be listed a
		•		
ecord specifies a delayed effective d	late but not an effective t	ime at 12:01 a.m. on	the earlier of (h)	The 90th day ofter th
is filed.	iate, but not an effective i	inic, at 12.01 a.m. on	the earner or. (b)	The 90th day after th
				- 1
June 12 ted	2023			,
	••	·		:
				,
M Marine.				•
N. Mlwmy sign	gnature of a member or auth	orized representative of	a member	