

L200000296257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

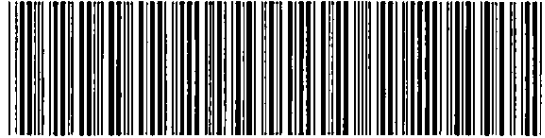
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700413814537

08/14/23--01041--013 **25.00

2023 AUG 14 AM 8:44

A. PARISHANI

SEP 17 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Recovery for Life treatment and Wellness Center 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:

Annaiza Colón
Name of Person

Recovery for Life treatment and Wellness Center LLC
Firm/Company

1359 E. Sample RD
Address

Pompano Beach FL 33064
City/State and Zip Code

Annaiza. Colón@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Annaiza Colón at (305) 766-9667
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**

Recovery for Life Treatment and Wellness Center 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 9/21/20 and assigned
Florida document number L20000296257

This amendment is submitted to amend the following:

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

Recovery for Life Treatment and Wellness Center 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)

1359 E. Sample RD
Pompano Beach FL 33064

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1359 E. Sample RD
Pompano Beach FL 33064

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:

Annaiza Colón

New Registered Office Address:

1359 E. Sample

Enter Florida street address

Pompano Beach

City

Florida

33064

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.

Annaiza Colón

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>
<u>Pres</u>	<u>Annaiza Sharma</u>	<u>1900 NW 44th ST</u>	<input type="checkbox"/> Add
		<u>Deerfield Beach</u>	<input checked="" type="checkbox"/> Remove
		<u>FL 33064</u>	<input type="checkbox"/> Change
<u>Pres</u>	<u>Annaiza Colón</u>	<u>1359 E. Sample RD</u>	<input checked="" type="checkbox"/> Add
		<u>Pompano Beach</u>	<input type="checkbox"/> Remove
		<u>FL 33064</u>	<input checked="" type="checkbox"/> Change
<u>VPres</u>	<u>Rudradave Sharma</u>	<u>1900 NW 44th ST</u>	<input type="checkbox"/> Add
		<u>Deerfield Beach</u>	<input checked="" type="checkbox"/> Remove
		<u>FL 33064</u>	<input type="checkbox"/> Change
<u>VPres</u>	<u>Chad A. Laramore</u>	<u>1900 NW 44th ST</u>	<input type="checkbox"/> Add
		<u>Deerfield Beach</u>	<input checked="" type="checkbox"/> Remove
		<u>FL 33064</u>	<input type="checkbox"/> Change
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Add
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Remove
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Change
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Add
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Remove
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Change

2023 AUG 11 AM 8:44

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

- Removal of Both V-Pres
- Change of Address
- Change of Pres's Last name
(from Sharma to Colon)

2023 AUG 14 AM 8:44

Annaiza Colon is the President of
Recovery for life treatment and wellness
Center.
As well as the only member of the
LLC.

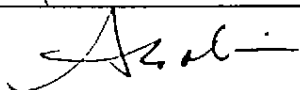
E. Effective date, if other than the date of filing: 8/9/2023 (optional)

(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 8/9/2023



Signature of a member or authorized representative of a member

Annaiza COLON

Typed or printed name of signee