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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ... CLUB COMMUNITY CARE LLC

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#### From: Yanet Avila

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

CLUB COMMUNITY CARE LLC				
(Name of the Limit	ed Liability Compa (A Florida Limited I	iny as it now appears on our i Liability Company)	ecor( s_	<del></del>
The Articles of Organization for this Limited Li Florida document number L20060340858	ability Company	were filed on 11/05/2020		_ and assigned
This amendment is submitted to amend the following	swing:			
A. If amending name, enter the new name of	Tthe limited liab	ullity company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation	"LLC" or the abbrev	viation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		164 NW MADISON STE	REET	
		LAKE CITY, FL 32055		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	164 NW MADISON STE LAKE CITY, F1, 32055	SEET E	20 DEC 11 F
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, g	enter the name ô	- I
Name of New Registered Agent:	DAMARY DIA	AZ HERNANDEZ		· 
New Registered Office Address:	164 NW MADI			
		Enter Florida street	ndelress	
	LAKE CITY	Cay	_, Florida <u></u>	Zip Code
		Cuy		esp Cone

### 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. Thereby confirm that the limited liability company has been notified in writing of this change.

/s/ Damary Dian Hornander

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
AMBR	JISELL LOPEZ ARRIETA	3752 SW COUNTY RD 13	□Add
		FORT WHITE, FL 32038	
			[]Change
AMBR	DAMARY DIAZ HERNANDEZ	164 NW MADISON STREET	□Add
		LAKE CITY, FL 32055	DRemove
			<b>≡</b> Change
			□Add
			TRemove
			□Change
			DAdd
		□Remove	
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		represent the Partie of Control o	□Add
		]Remove	
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			□Remove
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Note: If the date inserted in the	the date of filing:  must be specific and cannot be prior to date of filing or me s block does not meet the applicable statutory filing e Department of State's records.	(optional) or than 90 days after filing.) Pursuant to 605,0207 (3, requirements, this date will not be listed as the
the record specifies a delayed effe ord is filed.	etive date, but not an effective time, at 12:01 a.m. o	n the earlier of: (b) The 90th day after the
Dated	2020	
	Damary Diaz Hernandez Signature of a member or authorized representative	of a member

Typed or printed name of signee