

08/24/2021

13:50 Permenter Law Firm, P.A.

(FLK) 352-622-1866

10:00:17 (003)

8/24/2021

Division of Corporations

L20000367258

Florida Department of State

Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN REJUVA DERMATOLOGY & VEIN CENTER, PLLC

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AUG 25 2021

A. LUNT

2021 AUG 24 PM 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

REJUVA DERMATOLOGY & VEIN CENTER, PLLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on November 19, 2020 and assigned Florida document number L20000367258.

This amendment is submitted to amend the following:

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

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 office address, if applicable: 395 Commercial Court, Suite C
Venice, Florida 34292

Enter new mailing address, if applicable: 2389 East Venice Avenue
Unit 510
Venice, Florida 34292

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: _____

New Registered Office Address: 395 Commercial Court, Suite C
Venice, Florida 34292

New Registered Agent's Signature. If changing Registered Agent:

I hereby certify 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

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C. 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

AR = Authorized Representative

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Sean Mazloom	2389 East Venice Avenue Unit 510 Venice, Florida 34292	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
MGR	Golta Rasouli	2389 East Venice Avenue Unit 510 Venice, Florida 34292	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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

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E. Effective date, if other than the date of filing: _____ (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 Aug 24, 2021.


Signature of a member or authorized representative of a member

GOLTA RASOULI

Typed or printed name of signer

Filing Fee: \$25.00

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