

11/25/24, 3:04 PM

Division of Corporations

Florida Department of State  
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**To:**

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : FRANK, WEINBERG, BLACK, P.L.  
Account Number : I20040000083  
Phone : (954)474-8000  
Fax Number : (954)474-9850

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SOUTH FLORIDA JOINT REPLACEMENT SURGEONS, LLC**

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTH FLORIDA JOINT REPLACEMENT SURGEONS, 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 12/03/2020 and assigned  
Florida document number 1.20000378368.

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 offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

Frank Weinberg & Black, P.L.

New Registered Office Address:

7805 SW 6th Court ATTN: Steven Weinberg

Enter Florida street address

Plantation


Florida 33324

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

Steven A. Weinberg

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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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	JBC ASC, LLC	1601 Clint More Road #125	<input type="checkbox"/> Add
		BOCA RATON, FL 33487	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BERKOWITZ ASC, LLC	7020 VENTURA COURT	<input type="checkbox"/> Add
		PARKLAND, FL 33067	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	SEN SURGICAL, LLC	4744 SOUTH OCEAN BLVD TH 6	<input type="checkbox"/> Add
		HIGHLAND BEACH, FL 33487	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	BJ ORTHO, LLC	4231 NE 25TH AVE	<input type="checkbox"/> Add
		LIGHTHOUSE POINT, FL 33064	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	WVB SURGICAL, LLC	2848 26TH ST.	<input checked="" type="checkbox"/> Add
		FORT LAUDERDALE, FL 33305	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Richard Berkowitz	7020 VENTURA COURT	<input checked="" type="checkbox"/> Add
		PARKLAND, FL 33067	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

**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.

11/25/2024

Dated \_\_\_\_\_, \_\_\_\_\_

**- Developed by:**

Richard Berkowitz

Signature of a member or authorized representative of a member

Richard Berkowitz

Typed or printed name of signer

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**Filing Fee: \$25.00**