

L20 000394869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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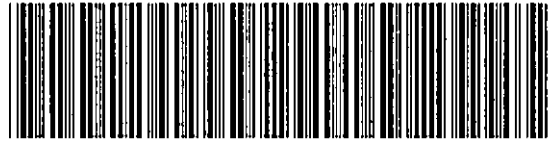
(Business Entity Name)

(Document Number)

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*Handwritten signature*

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** AMC - SPINE SOLUTIONS, PLLC  
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:

Adil Daudi  
Name of Person

Daudi & Kroll, P.C.  
Firm/Company

4121 Okemos Road, Suite 10  
Address

Okemos, Michigan 48864  
City/State and Zip Code

adil@daudikroll.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adil Daudi at ( 517 ) 381-2663  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

AMC - SPINE SOLUTIONS, PLLC

**(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 December 17, 2020 and assigned Florida document number L20000394869.

This amendment is submitted to amend the following:

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

SPINE SOLUTIONS, PLLC

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:**

27253 Van Dyke Ave, Suite B

**(Principal office address MUST BE A STREET ADDRESS)**

Warren, Michigan 48093

**Enter new mailing address, if applicable:**

27253 Van Dyke Ave, Suite B

**(Mailing address MAY BE A POST OFFICE BOX)**

Warren, Michigan 48093

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**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: \_\_\_\_\_

*Enter 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>	<u>Type of Action</u>
AMBR	Najam Ul-Hasan	27523 Van Dyke Ave, Suite B	<input type="checkbox"/> Add
		Warren, MI 48093	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Muhammad Munir	27523 Van Dyke, Suite B	<input checked="" type="checkbox"/> Add
		Warren, MI 48093	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Alex Stratilatov	4121 Okemos Road, Suite 10	<input checked="" type="checkbox"/> Add
		Okemos, MI 48864	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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