

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L21000022055

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(((H21000254165 3)))



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To:

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

From:

Account Name : FASTKIT CORP
 Account Number : I20100000009
 Phone : (305)599-0839
 Fax Number : (305)592-9591

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

Email Address: _____

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 2021 JUN 30 PM 9:47
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 SINA MEDICAL CENTER LLC**

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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BB 7/1/21

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

SINA MEDICAL 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 01-25-2021

Florida document number L21000022055

This amendment is submitted to amend the following:

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

n/a

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

Enter new principal offices address, if applicable:

1541 SE 12 AVE STE 21 HOMESTEAD, FL 33034

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1541 SE 12 AVE STE 12 HOMESTEAD, FL 33034

(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:

LAZARO CASTRO

New Registered Office Address:

1541 SE 12 AVENUE, SUITE 21

Enter Florida street address

MIAMI

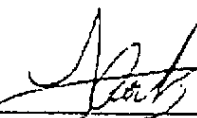
Florida 33034

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

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TALLAHASSEE, FLORIDA

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	MICHAEL RIVERA	1541 SE 12 AVE, STE 21 HOMESTEAD, FL 33034	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LAZARO CASTRO	1541 SE 12 AVE STE 21 HOMESTEAD, FL 33034	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

NA

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TALLAHASSEE, FLORIDA

F. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the document is effective as of the date listed.)

(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 is immaterial to this filing, it may be left blank.

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 JUNE 29 2021

Chen

Signature of a member or authorized representative of a member

LAZARO CASTRO

Typed or printed name of signee