

1210000067697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

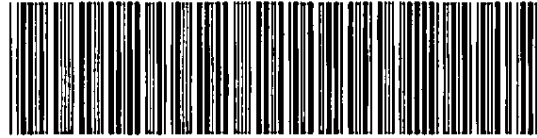
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

NC; Amend

Office Use Only



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T. A. S.
2/24/2022

FILED
2022 JAN 27 PM 1:44
2022 JAN 27 PM 1:44
STATE OF NORTH CAROLINA
RECEIVED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Katie Essick Physical Therapy LLC
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:

Kathleen Carpenter
Name of Person
Katie Carpenter Physical Therapy LLC
Firm/Company
2502 Madrid Way S
Address
St. Petersburg, FL 33712
City/State and Zip Code
katiecarpenterdpt@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathleen Carpenter 352 229-3120
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$60.00 Filing Fee, Certificate of Status & Certified Copy (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

FILED
2022 JAN 27 PM 1:44
TALLAHASSEE, FL
SECRETARY OF STATE

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

Katie Essick Physical Therapy 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 2/8/21 and assigned
Florida document number 1.21000067697.

This amendment is submitted to amend the following:

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

Katie Carpenter Physical Therapy LLC

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)

2502 Madrid Way S

St. Petersburg, FL 33712

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2502 Madrid Way S

St. Petersburg, FL 33712

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:

Tyler Carpenter

New Registered Office Address:

2502 Madrid Way S

Enter Florida street address

St. Petersburg



Florida 33712

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>
	Katie Essick	5072 Starfish Dr SE Suite F	<input type="checkbox"/> Add
		St. Petersburg, FL 33705	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kathleen Carpenter	2502 Madrid Way S	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL 33712	<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

2022 JAN 21
11:51 AM
11:51 AM

2022 JAN 27 AM 9:55

(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)

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 January 25th 2022

Kathleen Carpenter

Signature of a member or authorized representative of a member

Kathleen Carpenter

Typed or printed name of signee

Filing Fee: \$25.00