		(Red	questors	Name)		
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	- "	(City	y/State/Z	ip/Phone	#)	
] PICK-	UP	□ v	VAIT		MAIL
		(Bu	siness E	ntity Nam	e)	
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ertified (Copies _		_ Ce	rtificates	of Statu	s
Special	Instructio	ns to f	Filing Off	icer:		
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Office Use Only



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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
	s Pediatric Therapy Center, LLG	C	
SUBJECT:	Name of Lim	ited Liability Company	·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
riease feturiran correspo	mache concernang this matter	to the following.	
	Chayma Gomez		
		Name of Person	
		Firm/Company	
	2897 SW 129 Way		
		Address	
	Miramar, FL 33027		···
		City/State and Zip Code	
	Chayma.Gomez@gmail.com	n to be used for future annual report not	illustion)
For further information of	concerning this matter, please co		
Chayma Gomez		786 5128376 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Addre Registration		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632	•	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Laser Focus Pediatric Therapy Center			
(Name of the Limited	I Liability Compa A Florida Limited	nny as it new appears on our r Liability Company)	records.)
he Articles of Organization for this Limited Lia	bility Company	were filed on $\frac{02/17/2021}{}$	and assigned
lorida document number L21000081049	<u> </u>		
his amendment is submitted to amend the follow	wing:		
If amending name, enter the new name of	the limited liab	ility company here:	
CAC SPOT, LLC			
he new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		2897 SW 129 Way	
		Miramar, FL 33027	
inter new mailing address, if applicable:		2897 SW 129 Way	
Mailing address MAY BE A POST OFFICE BOX)		Miramar, FL 33027	
3. If amending the registered agent and/or regent and/or the new registered office address		address on our records, <u>s</u>	enter the name of the new regist
Name of New Registered Agent:	Chayma Gomez	7.	
New Registered Office Address:	2897 SW 129 V	<u> </u>	
		Enter Florida street i	address
	Miramar		Florida ³³⁰²⁷
		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

Title	<u>Name</u>	Address	Type of Action
MGR	Samuel, George	511 SW 18TH AVE, UNIT 5	□ Add
		FT LAUDERDALE, FL 33312	■Remove
			□ Change
MGR	Gomez, Chayma	2897 SW 129 Way	■ Add
		Miramar, FL 33027	□ Remove
			□ Change
			□Add
			□Remove
			Change
			□ Add
			□ Remove
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Page 2 of 3

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Note:	ve date, if other than the date of filing: (optional) ctive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of 90th day after the record is filed.
Data d	August 18 2022
Dated _	Hon
	Signature of a member or authorized representative of a member
	Cheyla Gomez
	Typed or printed name of signee

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Filing Fee: \$25.00