

L21000093165

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TALLAHASSEE, FL
R. HUNT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PRIMARY MEDICAL PHYSICIANS, 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:

RAMON A. BERENGUER

Name of Person

Firm/Company

7050 TAFT STREET

Address

HOLLYWOOD, FL 33024

City/State and Zip Code

RBERENGUER@PRIMARYMEDPHYSICIANS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAMON A. BERENGUER

305 992-0659
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

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2007 JUN 25 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FL

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

PRIMARY MEDICAL PHYSICIANS, 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 02/18/2021 and assigned
Florida document number L21000093165.

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:

RAMON A. BERENGUER

New Registered Office Address:

7050 TAFT STREET

Enter Florida street address

HOLLYWOOD

City

Florida 33024

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	CARLOS H. ARCE	7050 TAFT STREET	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33024	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	EDDIE MOR	15381 SW 25TH STREET	<input type="checkbox"/> Add
		DAVIE, FL 33326	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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DAVIE, FL
JUN 10 2010

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

RAMON A. BERENGUER, SHALL HOLD 100% OF THE MEMBERSHIP INTEREST AND OUTSTANDING
SILARES IN PRIMARY MEDICAL PHYSICIANS, LLC. EFFECTIVE DECEMBER 28, 2022.

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TALLAHASSEE, FL

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.

Dated January 20, 2023.

Signature of a member or authorized representative of a member

RAMON A. BERENGUER

Typed or printed name of signee

Filing Fee: \$25.00

Action by Members Without Meeting
PRIMARY MEDICAL PHYSICIANS, LLC.

ACTION BY MEMBERS WITHOUT A MEETING

Accordance with Florida Statute 605

RAMOND A. BERENGUER, M.D. ("DR. BERENGUER"), CARLOS H. ARCE ("MR. ARCE"), and EDDIE MOR ("MR. MOR"), as the holders of all the membership interest in PRIMARY MEDICAL PHYSICIANS, LLC., a Florida limited liability company (the "Company"), hereby adopt the following resolutions by written consent in lieu of holding a Meeting of Members, as permitted by Section 605 of the Florida Statutes:

WHEREAS, the Company was formed under Florida Statute 605, limited liability company, on February 18, 2021, and filed its Articles of Organization with state of Florida;

WHEREAS, the Company Operating Agreement currently states that DR. BERENGUER has 45.9%, MR. ARCE has 45.9%, and MR. MOR has 8.2% as members of the Company in respect to their interest (the "Members");

WHEREAS, the Members have agreed via this action, to change the membership interest in the company in accordance with the terms of the action, MR. ARCE and MR. MOR shall transfer effective the date this action is executed their collective 54.1% membership interest to DR. BERENGUER ("Effective Date of Transfer");

WHEREAS, the Company membership henceforth on the Effective Date of Transfer shall remove MR. ARCE and MR. MOR of all membership interest, rights and claims in the Company; and the Company sole Member shall only be DR. BERENGUER 100% membership interest;

WHEREAS, MR. ARCE and DR. BERENGUER have executed in addition to this action by members an "Assignment of Limited Liability Company Membership Interest", which contains the terms and conditions of the transfer of membership interest in the Company, which shall be attached to this action, and filed with the Company records;

WHEREAS, MR. MOR and DR. BERENGUER have executed in addition to this action by members an "Assignment of Limited Liability Company Membership Interest", which contains the terms and conditions of the transfer of membership interest in the Company, which shall be attached to this action, and filed with the Company records; and

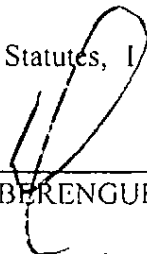
NOW, THEREFORE, BE IT RESOLVED, that, the Company's membership interest shall be DR. BERENGUER 100%, are hereby authorized, approved, and confirmed via this action.

(this section has been intentionally left blank, signature page to follow)

Action by Members Without Meeting
PRIMARY MEDICAL PHYSICIANS, LLC.

Pursuant to Section 605 of the Florida Statutes, I hereby consent to the foregoing Action by Members Without a Meeting.

Date: December 28, 2022



RAMON A. BERENGUER, MD - 100% Interest

Pursuant to the terms of this Agreement, I have agreed to comply and accept the terms of this Action and have agreed to transfer my membership interest in Primary Medical Physicians, LLC.

Date: December 28, 2022

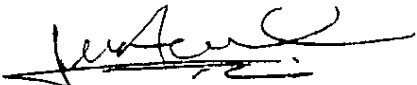


CARLOS H. ARCE

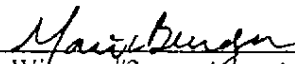
Date: December __, 2022

(MR. MOR Signing on different Document)

EDDIE MOR



Witness #1: Lizeth V. Arencibia.
FL DL AS ID



Witness #2: Maria del Carmen Bendezu
FL DL AS ID

(JURAT PAGE TO FOLLOW)

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Action by Members Without Meeting
PRIMARY MEDICAL PHYSICIANS, LLC.

JURAT PAGE

STATE OF FLORIDA:
COUNTY OF Polk:

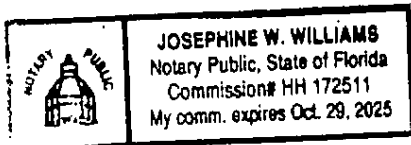
BEFORE ME, the signee(s) in this action, personally appeared, and I have verified their identities by production of Driver's License, and I have witnessed each signee affix his or her signature to this action. *Theresa L. Williams*

I have witness this before me this 28 day of December 2022.

Signature: *[Signature]*

NOTARY SEAL

My Commission Expires: *October 29, 2025*



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