LZ1000273173

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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2021 SEP -7 PH 7: 40

COVER LETTER

Registration Section
Division of Corporations

го:

T SUBJECT:	Tiger Health Markets, LLC				
, o b o b o b o b o b o b o b o b o b o		Name of Limi	ted Liability Company	· .	
The enclosed A	Articles of A	Amendment and fee(s) are sub-	nitted for filing.		
Please return a	ll correspor	ndence concerning this matter	to the following:		
		Steven Adams			
			Name of Person	_	
		Tiger Health Markets, LLC	;		
			Firm/Company		
		1445 Sadler Road #1017			
		-	Address		
		Fernandina Beach, FL 320	34		
		·	City/State and Zip Code		
		sadams@tigerpi.com			
		E-mail address: ()	o be used for future annual repo	ort notification)	
or further info	ormation co	oncerning this matter, please ea	oll:		
Steven Adams	;		at ()	985	
	Name of	Person		Daytime Telephone Number	
Enclosed is a c	heck for th	e following amount:			
■ \$25.00 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Regi Divi P.O.	ng Address stration S sion of C Box 632 ahassee, F	Section orporations 7	The Centro 2415 N. M		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 SEP -7 PM 7: 43

Tiger Health Markets, LLC

(Name of the Limited Liability Company as it now appears on our records) HASSELLEUM (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on June 11, 2021	and assigned
Florida document number L21000273173		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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 a agent and/or the new registered office address here: Name of New Registered Agent:	nddress on our records, <u>enter th</u>	e name of the new registered
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Flor	ida
-	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as principled to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and provided for in Chapter 605, F.	I am familiar with and S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AR	Colton Nixon	908 Regina Dr	□Add
		Hewitt, TX 76643	Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			[]Remove
			Change
			□Remove
			
		·	☐Add
			□Remove
			Change

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). If amending any other informa	ation, enter change(s) here: (A	ttach additional sheets, if necessary.)	
			
			
 			
			
			
			
			
			
		(h	
C. Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	ust be specific and cannot be prior to data block does not meet the applicable s	e of filing or more than 90 days after filing.) Pursuant to statutory filing requirements, this date will not be	o 605,0207 (3) e listed as the
f the record specifies a delaye b) The 90th day after the re		effective time, at 12:01 a.m. on the e	arlier of:
September 3	2021		
	The Addi) % 1	
	Signature of a member or authorized	representative of a member	_
Steven Adams			

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Typed or printed name of signee