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## Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Flarida 32312 (850) 656-4724

DATE 08/20/2021	-		**WALK	<b>N**</b>
ENTITY NAME Bonsai	Physical Therapy LLC	;		
DOCUMENT NUMBER_				_
	**PLEASE FILE THE	ATTACHED AND RETURN**		
xxxxxx	Plain Copy			
	Certified Copy			
	Certificate of Status			
	Certified Copy of Arts ( Certificate of Good Stand			
	**APOSTILLE' / NO	OTARIAL CERTIFICATION**		
COUNTRY OF DESTINA NUMBER OF CERTIFICA				
TOTAL OWED \$25.00		ACCOUNT #: I2016000007	2	
		E 8710		
Please call Tina at t	he above number for a	ny issues or concerns. Thank you so	much!	

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bonsai Physical Therapy LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000371048</u> .	were filed on 08/18/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	11161 E State RD 70 STE 110	<del>&amp;</del>
Principal office address MUST BE A STREET ADDRESS)	Lakewood Ranch, FL 34202	721/ TAA
	Manatee County US	
		20
Enter new mailing address, if applicable:		Soc 🗻 📆
Mailing address MAY BE A POST OFFICE BOX)		70 g
muning undress WAT DE 71 1 001 OF 1100 100.19		72 N
		— <del>_ , ~ @</del>
<ol> <li>If amending the registered agent and/or registered office agent and/or the new registered office address here:</li> </ol>	address on our records, <u>enter th</u>	e name of the new registe
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	Enter Florida street address	
	, Flor	ida
	City	Zin 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>	Address	Type of Action
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meetive date, it other than the an effective date is listed, the date mu	e date of filing: st be specific and cannot be prior to date of filing of	or more than 90 days after filing.) Pursuant	to 605.02
<u>fote:</u> If the date inserted in this becoment's effective date on the I	lock does not meet the applicable statutory for does not meet the applicable statutory for the statuto	iting requirements, this date will not t	e usicu i
record specifies a delaye	d effective date, but not an effective	ve time, at 12:01 a.m. on the	earlier
The 90th day after the re-	cora is rilea.		
atedated	2021		
	Christopher Saylor Signature of a member or authorized representa		
	Christopher Jaylor		
	Signature of a mamber or authori ny lavara anto	itive of a member	<del>-</del>

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