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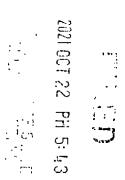
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	Address)
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## **COVER LETTER**

	Registration Se Division of Cor		•		• • «	•
SUBJEC	Unbeatable	Health Options LLC	4	۵	, d	œ
SUBJEC	.1:	Name of Lim	ited Liability Company			
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspo	ndence concerning this matter	to the following:			
		Dennis W Velasquez				
			Name of Limited Liability Company  and fee(s) are submitted for filing.  ning this matter to the following:  Velasquez  Name of Person  E-Health Options LLC  Firm/Company  arr Drive  Address  Orida 33603  City/State and Zip Code  nealthoptions@gmail.com  E-mail address: (to be used for future annual report notification)  matter, please call:  1813  370-8199  Area Code  Daytime Telephone Number  mount:  Sling Fee & S55.00 Filing Fee & S60.00 Filing Fee,			
		Unbeatable Health Options	LLC			
			Firm/Company		<u> </u>	
		1505 W Barr Drive				
		<del>-</del>	Address			
		Tampa, Florida 33603				
			City/State and Zip Code	:		
		unbeatablehealthoptions@g				
		E-mail address: (	to be used for future annua	I report notifica	ition)	
For furth	er information c	oncerning this matter, please co	all:			
Dennis V	Velasquez			70-8199		
	Name o	f Person		Daytime T	elephone Number	<del></del>
Enclosed	l is a check for th	he following amount:				
월 \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy		Certificate Certified	e of Status & Copy
	Mailing Addres Registration			Address: ration Secti	on	
	Division of C		_	on of Corpo		

P.O. Box 6327

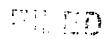
Tallahassee, FL 32314

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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



Unbeatable Health Options 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 $\frac{08/2}{}$	3/2021	and assigned
Florida document number 1.21000376742.			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the des	ignation "LLC" or the al	bbreviation "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 agent and/or the new registered office address here:	address on our rec	ords, <u>enter the nan</u>	<u>ae of the new registered</u>
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Floria	la street address	
		, Florida	T. C. I.
Non-Decisional Asset's Signature of shanging Decisioned Agents			гір Соав
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of norovided for in Cl	ny duties, and I am napter 605, F.S. Or,	familiar with and , if this document is
If Cha.	nging Registered Agei	nt, Signature of New Re	egistered 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
MGR	DENNIS W VELASQUEZ	1505 W BARR DR TAMPA, FL 33603	<b>\exists</b> Add
			🗖 Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
		·	□Remove
			□Change
			□Remove
			□Change
			□Add
			Remove
			□Change

fan ei Note:	tive date, if other than the date of filing:
	ord 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 filed.
atec	1 October 15th . 2021
	Signature of a member of authorized representative of a member

Filing Fee: \$25.00